## Pacific Air Switch Corporation Employment Application 2615 23<sup>rd</sup> Avenue, Forest Grove OR 97116 503-359-3939 An Equal Opportunity Employer

## **Personal Information**

Name:	Phone Number:	
A 1.1		
Are you legally que Are you at least 18 Have you ever be Can you work any Have you ever wo	alified to work in the United States?	
Date vou can star	t: Pay rate desired:	
Position desired:		
	employed?	
If so, may we contact your current employer?  \( \subseteq \text{Yes}  \subseteq \text{No} \)		
Referral Source	about us?  Walk In Advertisement Referral Other	
If referral, who referred you?		
	tory Starting with most recent first	
Employer Name:	Phone Number:	
From:	To Position Held:	
	g:	
Nature of work pe	rformed and responsibilities:	
Employer Name:	Phone Number:	
From:		
Supervisor Name:		
	g:	

## Pacific Air Switch Corporation Employment Application 2615 23<sup>rd</sup> Avenue, Forest Grove OR 97116 503-359-3939 An Equal Opportunity Employer

Nature of work performed and responsibilities:		
Employer Name	Phone Number:	
	To Position Held:	
	g:	
	rformed and responsibilities:	
References place	se list three people not related to you, whom you have known at least 3 years	
·	Years Known: Relationship:	
Phone Number:	Best Time to Contact:	
Name:	Years Known: Relationship:	
Phone Number:	Best Time to Contact:	
Name:	Years Known: Relationship:	
Phone Number:	Best Time to Contact:	
By signing below you agree to, understand and acknowledge the following statements:		
1. All information that I have provided is true and complete. I understand that any false information given may be grounds for refusal to hire or for immediate discharge if I am employed by Pacific Air Switch Corporation (hereby referred to as "the company"). I authorize the company to obtain complete information and records from any of the persons or companies I have named on this application. I agree to sign a release of liability for all such persons regarding the information provided.		
condition of employme	I am offered employment, I will be required to submit to testing for unlawful drugs as a ent. A positive test result may disqualify me for employment with the company. If I become mpany, I understand if at any point I test positive for unlawful drugs my employment with the ninated.	
or are later modified.	be responsible for complying with all policies and rules of the company as they currently exist Should I be hired my employment with the company is "at-will", meaning my employment be terminated at any point by either myself or the company with or without notice except as	
4. No representative of the company has any authority to change my at-will employment status or to otherwise enter into any employment agreement for any specified period of time, or assure me of any future position, benefits, or terms and conditions of employment, except as specifically stated in a written agreement signed and dated by the company president.		
Signaturo:	Date:	