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 Brooks, OR 97305
 (503) 792-3739
 ValleyFabCorp.com



257 Young St
 Woodburn, OR 97071
 (971) 239-4762
 NeWaveTC.com

Employment Application

THIS APPLICATION IS NOT AN EMPLOYMENT CONTRACT but merely is intended to evaluate suitability for employment. It is the policy of Valley Fab Corp to provide equal employment to all qualified persons without discrimination on the basis of sex, race, color, religion, age, marital status, national origin, citizenship, disability, veteran status, sexual orientation, or any other status protected under state or federal law. It is also the policy of the company to have the option of conducting pre-employment screening before a job offer is made. If a job offer is made, employment may be contingent upon the successful completion of a medical examination which may include providing body substance samples. Please inform us if you need a reasonable accommodation for accessibility in order to complete the application and selection process.

PERSONAL INFORMATION

Please Print

First Name: _____ Last Name: _____
 Current Street Address: _____ City: _____
 State: _____ Zip: _____ Phone: _____

EMPLOYMENT INFORMATION

Please Print

Position Applying For: _____ Date You Can Start Work: _____

Please answer all of the following questions. When necessary, note question number and use extra paper to provide explanations.

- | | | | |
|--|--|--|--|
| 1) Are you at least 18 years of age and legally eligible to work in the United States? | <input type="checkbox"/> YES <input type="checkbox"/> NO | 4) Have you filed an application with us before? | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| | | If Yes, give date: _____ | |
| 2) Are you currently employed? | <input type="checkbox"/> YES <input type="checkbox"/> NO | 5) Are you on layoff and subject to recall? | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| 3) Will you work overtime when necessary? | <input type="checkbox"/> YES <input type="checkbox"/> NO | 6) Have you ever worked for us before? | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| | | If Yes, give date: _____ | |

EDUCATION INFORMATION

Please Print

High School Attended: _____ City/State: _____ Diploma: YES NO
 Name of College: _____ Diploma: YES NO
 City/State: _____ Area of Study _____
 Name of Trade, Business or Other School: _____ Diploma: YES NO
 City/State: _____ Area of Study _____

Please list any knowledge, skills, and abilities that you feel would be an asset to our company: _____

EMPLOYMENT HISTORY

Please Print

Please list below your last 3 employers beginning with the most recent.

Most Recent Employer: _____

City: _____ State: _____ Zip: _____

Position Held: _____

Duties: _____

Phone: _____

Name of Supervisor: _____

Dates From/To: _____

Reason for Leaving: _____

Next Most Recent Employer: _____

City: _____ State: _____ Zip: _____

Position Held: _____

Duties: _____

Phone: _____

Name of Supervisor: _____

Dates From/To: _____

Reason for Leaving: _____

Next Most Recent Employer: _____

City: _____ State: _____ Zip: _____

Position Held: _____

Duties: _____

Phone: _____

Name of Supervisor: _____

Dates From/To: _____

Reason for Leaving: _____

APPLICANT'S CERTIFICATION AGREEMENT

1. I authorize the investigation of all statements contained in this application and release from all liability any persons or employers supplying such information, and I also release Valley Fab Corp from all liability that might result from making the investigation.
2. I certify that the facts and information set forth in the application are true and complete to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of facts on this application (or on any required documents) will be cause for denial of employment or immediate termination of employment, regardless of when or how discovered.
3. I agree, if I am offered and accept a position, to conform to all existing and future Valley Fab Corp rules, regulations and policies and I understand that the company reserves the right to change wages, hours, polices, and working conditions as deemed necessary. **I ALSO UNDERSTAND THAT, IF HIRED, MY EMPLOYMENT WILL BE AT-WILL, MEANING THAT EITHER PARTY CAN END THE EMPLOYMENT RELATIONSHIP AT ANY TIME AND FOR ANY OR NO REASON.**
4. I understand that any employment offer is contingent upon my providing, within three (3) working days of employment, valid proof of identity and eligibility to work in order to comply with the Immigration Reform and Control Act of 1986
5. I have read and reviewed the information provided in the application and the above statement. By signing this application for employment I certify that I understand all parts of it and have answered all questions completely and fully.

Signature

Date

WE ARE AN AT-WILL, EQUAL OPPORTUNITY EMPLOYER