



Pride Disposal Company

Employment Application

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

Last Name	First Name	Middle Name	Today's Date
Address:		City	State Zip code
Home Phone ()		Cell Phone ()	
Driver's License:	YES <input type="checkbox"/> NO <input type="checkbox"/> CDL YES <input type="checkbox"/> NO <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/>	Date CDL Issued _____	Endorsements: _____
E-mail Address: _____			
Position Applied for:		Date Available:	Desired Salary: \$ _____
Are you a U.S. citizen or otherwise authorized to work in the U.S. without restrictions? (Proof of citizenship or immigration status will be required upon employment)			YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you previously been employed by Pride?		If yes, give dates:	
YES <input type="checkbox"/> NO <input type="checkbox"/>			
Are you able to perform the essential functions of the position for which you are applying? (A complete job description is available for your review if you have any questions as to what functions are essential to the position for which you are applying with or without reasonable accommodation)			YES <input type="checkbox"/> NO <input type="checkbox"/>
If no, please explain: _____ _____			
EDUCATION AND FORMAL TRAINING			
Do you have a high school diploma or GED?		YES <input type="checkbox"/> NO <input type="checkbox"/>	
NAME & LOCATION OF SCHOOL	Major Course of Study	No. of years completed	DIPLOMA OR DEGREE RECEIVED
Please describe any special courses, seminars and/or training that would enable you to perform the position for which you are applying: _____ _____			
Did you hear about this job from a Pride employee? Who? _____			
References			
Please list two references other than relatives or previous employers			
Name:		Name:	
Company:		Company:	
Phone:		Phone:	

Employment History

Company: _____	Phone: (____) _____
Address: _____	Supervisor: _____
Job Title & Responsibilities: _____	
From: _____	To: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference?	YES <input type="checkbox"/> NO <input type="checkbox"/>

Company: _____	Phone: (____) _____
Address: _____	Supervisor: _____
Job Title & Responsibilities: _____	
From: _____	To: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference?	YES <input type="checkbox"/> NO <input type="checkbox"/>

Company: _____	Phone: (____) _____
Address: _____	Supervisor: _____
Job Title & Responsibilities: _____	
From: _____	To: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference?	YES <input type="checkbox"/> NO <input type="checkbox"/>

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING THIS APPLICATION. IF YOU HAVE ANY QUESTIONS REGARDING THIS STATEMENT, PLEASE ASK THEM BEFORE SIGNING.

I certify that all answers or statements I have made on this application or on my resume or other supplementary materials are true and correct without omissions. I acknowledge that any omission, false statement or misrepresentation on this application or supplementary materials will be cause for refusal to hire or for immediate dismissal from employment at any time during the period of my employment, regardless of when or how discovered.

I understand that Pride Disposal Company is an **"at will"** employer, and that no representative of Pride Disposal has any authority to enter into any employment agreement for any specified period of time, or to assure me of any future position, benefits or terms and conditions of employment, except as may be specifically set out in a current written agreement.

I understand that, should employment be extended to me, I may be subject to the satisfactory results of any job-related pre-employment examination required by Pride Disposal, including a blood and/or urine test to detect drug usage, and by my signature indicate my consent to such testing. I also understand that Pride Disposal uses Oregon State Patrol Database for background checks and will review Internet Social Networking sites.

I hereby authorize my past employers to release information to Pride Disposal regarding my employment. I give my permission for representatives of Pride Disposal to check references with any and all work-related contacts, including those listed on my employment application, those provided specifically by me, and any other contacts that may surface during the course of the hiring process. I understand that these references will be confidential and I will not have access to them. I indemnify and release Pride Disposal and all providers of information from any liability as a result of furnishing and receiving this information. This release of information covers my employment record in general, including information on the following: dates of employment; positions held; the quality and quantity of my work; my attendance habits (excluding workers' compensation, pregnancy, disability and protected absences); my relationship with co-workers and supervisors; my attitude toward work; reasons for leaving and eligibility for rehire; strong and weak points; whether I have had outbursts of temper, threatened, provoked fights with or assaulted others, engaged in hostile or violent behavior, have a criminal record or any traits that would present security or safety issues for others,; and other relevant information regarding my performance, skills, ability and, suitability for employment sought.

SIGNATURE OF APPLICANT

DATE