

Cascade Auto Recycling, LLC dba Cascade Metal Recycling

Application for Employment

Date: _____

Name (Last, First, Middle): _____

Street Address: _____

City, State, Zip: _____

Telephone: _____

Are you eligible to work in the United States? Yes No

Are you 18 years of age or older? Yes No

Have you ever been employed by Cascade Metal Recycling? Yes No

If YES, dates of employment and reason for leaving: _____

Are you related to any current Cascade Metal Recycling employee? _____

If YES, their name and their relationship to you: _____

Do you have a valid driver's license? Yes No

If YES, state of issuance, number and expiration date: _____

Education:

Name of School:	City/State:	Did you graduate?	Degree Received:
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High School:		<input type="checkbox"/> Yes <input type="checkbox"/> No	
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GED:		<input type="checkbox"/> Yes <input type="checkbox"/> No	
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Other School:		<input type="checkbox"/> Yes <input type="checkbox"/> No	
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College:		<input type="checkbox"/> Yes <input type="checkbox"/> No	
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Other credentials/licenses/professional affiliations, etc., which are relevant to the job(s) for which you are applying: _____

SKILLS: Please list technical skills, clerical skills, trade skills, etc., relevant to this position. Include relevant computer systems and software packages of which you have a working knowledge, and note your level of proficiency (basic, intermediate, expert):

REFERENCES: Please list three professional references:

Name: _____ **Relationship:** _____

Address: _____ **Phone:** _____

Name: _____ **Relationship:** _____

Address: _____ **Phone:** _____

Name: _____ **Relationship:** _____

Address: _____ **Phone:** _____

PLEASE READ CAREFULLY AND SIGN THAT YOU UNDERSTAND AND ACCEPT THIS INFORMATION:

I certify that the information on this application and its supporting documents is accurate and complete. I understand and agree that failure to fully complete the form, or misrepresentation or omission of facts, represents grounds for elimination from consideration for employment, or termination after employment if discovered at a later date. I authorize **Cascade Auto Recycling, LLC dba Cascade Metal Recycling** to investigate, without liability, all statements contained in this application and supporting materials. I authorize references and former employers, without liability, to make full response to any inquiries in connection with this application for employment. If requested, I agree to submit to a physical exam, criminal and credit background investigation, and/or screening for illegal substances upon conditional offer or employment. I understand that this document is NOT an offer of employment, and that an offer of employment, if tendered, does NOT constitute a contract for continued guaranteed employment. I understand that employees of **Cascade Auto Recycling, LLC dba Cascade Metal Recycling** serve at-will, and the employment relationship may be terminated at any time by either party, for any or no reason, other than a reason prohibited by law. If employed, I will be required to furnish proof of eligibility to work in the United States, to file a State security questionnaire and State loyalty oath, and to comply with company and departmental regulations. I understand that if employed on a temporary basis, I would be paid for hours worked only, and would be ineligible for benefits including paid time off. I understand that any benefits I receive may be subject to change or discontinuation at any time without prior notice. I understand that the first TWO MONTHS of regular employment represent a provisional period, during which I would not be eligible to apply for transfer or promotion and during which I may be terminated without right of appeal.

Applicant Signature: _____ **Date:** _____