



10590 Donald Road N.E.
Post Office Box 427
Donald, OR 97020-0427
PH: (503) 678-5525
Fax: (503) 678-5693
hr@gkmachine.com
www.gkmachine.com

APPLICATION FOR EMPLOYMENT

GK Machine, Inc. is an Equal Employment Opportunity Employer

GENERAL INFORMATION

Name: _____

Address: _____ City: _____ State: _____

Telephone: (____) _____ Social Security Number: _____

Date available for employment: _____

If employed and under 18, can you furnish a work permit? Yes No

Have you ever been employed by this company? Yes No

Are you currently employed? Yes No

May we contact your present employer? Yes No

If yes, give contact name: _____

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration status?

Yes No

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

State issued: _____ License Number: _____

Type of work desired: _____

Wage desired: _____

Can you perform the essential functions of the job(s) for which you are applying? Yes No

Are you available to work: _____ Full-Time _____ Part-Time _____ Over-Time _____ Swing Shift

Have you been convicted of a felony? Yes No

(Please note that a "YES" answer will not bar you from consideration for employment.)

If Yes, Please explain: _____

EDUCATION

	<i>Elementary</i>	<i>High School</i>	<i>College</i>	<i>Graduate</i>
School Name	_____			

Years Completed	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Course of Study	_____			

SPECIAL SKILLS, QUALIFICATIONS, AND CONSIDERATIONS:

Summarize special skills and qualifications, volunteer activities, military experience, employment or other activities related to the job you are seeking:

REFERENCES:

List 3 non-relatives who are familiar with your qualifications, actual work history, and abilities.

Name: _____ Occupation/Relationship _____

Years Known: _____ Telephone (____) _____

Name: _____ Occupation/Relationship _____

Years Known: _____ Telephone (____) _____

Name: _____ Occupation/Relationship _____

Years Known: _____ Telephone (____) _____

EMPLOYMENT EXPERIENCE:

State your employment history, starting with your present or last job. List your last 4 jobs in order. Do not omit any job.

Employer: _____ Supervisor's Name: _____

Address: _____

Your job description: _____ Employed from: _____ (mo/yr)

Telephone: (____) _____ Employed to: _____ (mo/yr)

Your starting salary/hourly wage: _____ Duty(s): _____

Your ending salary/hourly wage: _____ Duty(s): _____

What did you like most about your job? _____

What did you like least about your job? _____

Reason for leaving: _____

Employer: _____ Supervisor's Name: _____
Address: _____
Your job description: _____ Employed from: _____ (mo/yr)
Telephone: (____) _____ Employed to: _____ (mo/yr)
Your starting salary/hourly wage: _____ Duty(s): _____
Your ending salary/hourly wage: _____ Duty(s): _____
What did you like most about your job? _____

What did you like least about your job? _____

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Employer: _____ Supervisor's Name: _____
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Your job description: _____ Employed from: _____ (mo/yr)
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Your starting salary/hourly wage: _____ Duty(s): _____
Your ending salary/hourly wage: _____ Duty(s): _____
What did you like most about your job? _____

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Employer: _____ Supervisor's Name: _____
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Your job description: _____ Employed from: _____ (mo/yr)
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Your starting salary/hourly wage: _____ Duty(s): _____
Your ending salary/hourly wage: _____ Duty(s): _____
What did you like most about your job? _____

What did you like least about your job? _____

Reason for leaving: _____

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING THIS APPLICATION. ONLY THOSE APPLICATIONS THAT ARE SIGNED AND DATED ARE CONSIDERED VALID. IF YOU HAVE ANY QUESTIONS REGARDING THESE STATEMENTS, PLEASE ASK BEFORE SIGNING.

I certify that all answers and statements I have made on this application (and resume or other supplementary materials) are true and complete without omissions. I understand that any false information will be grounds for refusal to hire or for immediate discharge if I am employed. I authorize any of the persons or organizations named in this application to give you complete information and records regarding my employment, education, character and qualifications.

Yes No

I will be responsible for familiarizing myself with all rules and regulations of the company as they presently exist or are later modified. I recognize that my employment can be terminated, at the discretion of the company or at my option, without notice, at any time, except as specifically set forth in writing in a current individual employment agreement.

Yes No

I also understand that no representative of GK Machine, Inc. 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 specifically stated in a current written agreement signed by the president.

Yes No

I understand that If I am considered for a position with GK Machine I will be required to submit a pre-employment drug screen and have a physical examination done.
In addition my drivers licence may be verified along with a thorough background check

Yes No

I have read, understand and agree with the above.

Signature of Applicant

Date

This application is valid for only ninety (90) days from the date I signed. If I want to be considered for job openings more than ninety (90) days from date signed, I will submit a new application.

GK Machine, Inc. is an equal employment opportunity employer. All applicants will be considered without regard to age, national origin, religion, sex or other protected status in accordance with applicable federal and state equal employment opportunity laws.