

CASCADE PUMP COMPANY

PRE EMPLOYMENT APPLICATION FORM

DATE _____

- 1. Type of work/position you are applying for: _____
- 2. Name _____ 3. Social Security No. _____
- 4. Telephone () _____ () Own Phone () Neighbor's Phone
- 5. Are you a minor? _____ If yes, state age _____
- 6. Present address _____ City, State and Zip _____
- 7. If employed, can you provide proof of legal right to work in the United States? () Yes () No
If No, explain _____
- 8. Skills, Abilities, and Experiences which you feel would especially fit you for work (include any certificates or diplomas received in this occupation) _____

- 9. List all machines which you have set-up and/or operated _____

- 10. List any mechanical skills which you possess _____

- 11. Do you read blueprints? _____
- 12. Do you have transportation in order to get to work each day? _____
- 13. In the event of an emergency, notify: Name _____ Telephone() _____
- 14. Have you been previously employed by us? _____ If yes, When? _____

15. PLEASE READ BEFORE SIGNING THIS PRE-EMPLOYMENT APPLICATION FORM

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. In the event of employment, I understand any false or misleading information given in my application or interview(s) may result in discharge. I also understand that I am required to abide by all rules and regulations of the Company. In consideration of my employment, I agree to conform to the rules and regulations of the Company, and understand that my employment and compensation can be terminated with or without cause, and with or without notice, at any time, at the option of either the Company or myself. I further understand that no manager or representative of the Company, other than a Corporate Officer, has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing.

SIGNATURE OF APPLICANT

DATE OF SIGNATURE

Do not write below this line

FOR OFFICE USE ONLY

Applicant interviewed by _____ Date _____ Time _____

EMPLOYMENT ACCEPTANCE

Report to work date _____ Starting pay rate \$ _____ per hour / month

Probation Classification _____

The Company reserves the right to re-negotiate probation employment, pay rate or classification based on individual job performance. Probation period of 90 calendar days.

Employee Signature _____ Date _____

Initial

Date

Accept

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EMPLOYMENT HISTORY

Applicant's Name _____

Employment Record (start with present and/or most recent employer)

Employer	Employed	Your Responsibilities
Address	FROM: TO:	
Telephone Area code ()		
Your Position/Title	Base Hourly Wage	
Title and name of Supervisor	START: LEAVING:	
Reason for Leaving		

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