SHASTA FOREST PRODUCTS, INC. **Employment Application**

An Equal Opportunit	ty Employer			
Please Print				
Date	Last Name	First Name	Middle	
Present Address				
No. & Street		City	State	Zip Code
Permanent Address	(if different from present a	ddress)		
No. & Street		City	State	Zip Code
Business Phone	Home Phone	Email Address		
Employment Desire	ed			
Position applying fo	r:			
Personal Information	on			
How did you hear ab	pout our company and this	s job opening? Shasta Forest Pr	oducts, Inc	
Have you ever applie	ed to or worked for Shast	a Forest Products, Inc	befo	ore? Yes No
If yes, when?				
Why are you applyir	ng for work at			?

If hired, would you have a reliable means of transportation to and from work?work?	
Are you at least 18 years old? (If under 18, hire is subject to verification that you are of minimum legal age.)	
Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? No	
If no, describe the functions that cannot be performed.	
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(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, and to skill and agility tests.)

We may refuse to hire relatives of present employees if doing so could result in actual or potential problems in supervision, security, safety, or morale, or if doing so could create conflicts of interest.

School	Name and Address			No of Years Completed	Did you Giaduale?	Degree or Diploma
High School					Yes No	
	Name					
	Address					
	City	State	Zip Code	-		
College/					Yes No	
University	Name	<u> </u>				
	Address					
	City	State	Zip Code	-		

Education, Training, and Experience

School	Name and Address			No. of Years Completed	Did you Graduate?	Degree or Diploma
Vocational/ Business	Name				Yes No	
	Address					
	City	State	Zip Code			
Training	Name	<u>,</u>			Yes No	
	Address					
	City	State	Zip Code			

Education, Training, and Experience - continued

Employment History

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List below all present and past employment starting with your most recent employer (last five years is sufficient). You must complete this section even if attaching a resume.

Name of Employer			Phone Num	ber		
Type of Business			Your Super	visor's Name		
Address & Street				lity	State	Zıp Code
Dates of Employmer	nt:					
	From	То				
Current Employer ?.						Yes 🗌 No
Your Position and Duties	5					
Reason for Leaving						
May we contact this	employer for a i	reference?				Yes 🗌 No

Occupation

Name of Employer		Phone Number	
Type of Business		Your Supervisor's Name	
Address & Street		City	State Zip Code
Dates of Employment:			
Fron	n To		
our Position and Duties			
Reason for Leaving			
Nay we contact this employ	ver for a reference?		Yes No
Note: Attach additional page(s) if r	necessary.		
	· · · · · · · · · · · · · · · · · · ·		
References			
	ot related to you who ha	we knowledge of your work per	formance within the last th
ist below three persons no		ive knowledge of your work per	
ist below three persons no	t related to you who ha	ive knowledge of your work per	formance within the last the Phone Number
ist below three persons no			
ist below three persons no		ve knowledge of your work peri	Phone Number
List below three persons no			Phone Number
List below three persons no		City	Phone Number
List below three persons no		City	Phone Number State Zip Code
List below three persons no		City	Phone Number
ist below three persons no	Last Name	City No. of Years Acquainted	Phone Number State Zip Code Phone Number
List below three persons no	Last Name	City	Phone Number State Zip Code
List below three persons no	Last Name	City No. of Years Acquainted City	Phone Number State Zip Code Phone Number
List below three persons no	Last Name	City No. of Years Acquainted	Phone Number State Zip Code Phone Number
List below three persons no	Last Name	City No. of Years Acquainted City	Phone Number State Zip Code Phone Number State Zip Code
	Last Name	City No. of Years Acquainted City	Phone Number State Zip Code Phone Number

No. of Years Acquainted

Please Read Carefully, Initial Each Paragraph and Sign Below

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my Initials knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery. to thoroughly investigate my I hereby authorize Shasta Forest Products, Inc. references, work record, education and other matters related to my suitability for employment (excluding Initials criminal background information) unless otherwise specified above. I further authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure. I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me Initials and the Company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the Company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the Company's designated representative. In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form Initials upon hire.

The Company will consider qualified applicants, including those with criminal histories, in a manner consistent with state and local "Fair Chance" laws.

Date

Applicant's Signature