



CASCADE FIRE EQUIPMENT COMPANY

APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

APPLICANT INFORMATION

Position(s) Applying For		Date of Application	
Last Name	First Name	Middle Name	
Address	City, State	Zip Code	
Telephone Number(s)		Best time to contact	
Email			
Have you ever filed an application with us before?.....		[] Yes [] No	
Are you currently employed?.....		[] Yes [] No	
May we contact your present employer?.....		[] Yes [] No	
Are you currently on "lay-off" status and subject to recall?.....		[] Yes [] No	
Are you a citizen of the United States?.....		[] Yes [] No	
If no, are you authorized to work in the U.S.?.....		[] Yes [] No	
Would you be willing to submit to a drug test?.....		[] Yes [] No	
Date available for work?		Desired Salary Range	

EDUCATION

High School	Address
Did you graduate? [] Yes [] No	Date of Graduation:
College	Address
Did you graduate? [] Yes [] No	Date of Graduation: Degree(s):
Other (specify)	Address
Did you graduate? [] Yes [] No	Date of Graduation:
Start Date: End Date:	Degree(s):

WORK EXPERIENCE

Start with your present or last job. Include any job-related military service and volunteer activities.

Company	Address		
Job Title	Supervisor	Telephone Number(s)	
Start Date:	End Date:	Starting Salary	Ending Salary
Responsibilities			
Reason for leaving	May we contact your previous supervisor for a reference? [] Yes [] No		

WORK EXPERIENCE

Company		Address	
Job Title	Supervisor	Telephone Number(s)	
Start Date:	End Date:	Starting Salary	Ending Salary
Responsibilities			
Reason for leaving		May we contact your previous supervisor for a reference? []Yes []No	

WORK EXPERIENCE

Company		Address	
Job Title	Supervisor	Telephone Number(s)	
Start Date:	End Date:	Starting Salary	Ending Salary
Responsibilities			
Reason for leaving		May we contact your previous supervisor for a reference? []Yes []No	

REFERENCES Please list three professional references.

Name	Relationship	Telephone Number(s)
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ADDITIONAL INFORMATION Describe below additional information and/or qualifications which relate to the job you're applying for.

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**You can mail the completed application to PO Box 4248, Medford, OR 97501,
drop off at our location 8389 11th Street, White City, OR 97503
(Monday to Friday 8AM-5PM), or email to don@cascadefire.com.**

Thank you for your interest in our company!