

COMPLETE DESIGN INC. APPLICATION FOR EMPLOYMENT

ALL POTENTIAL EMPLOYEES ARE EVALUATED WITHOUT REGARD TO RACE, COLOR, RELIGION, AND GENDER, NATIONAL ORIGIN, AGE, OR MARITAL STATUS; THE PRESENCE OF A NON-JOB RELATED HANDICAP OR ANY OTHER LEGALLY PROTECTED STATUS.

Position Sought: _____ Date _____
 How did you learn about the position? _____

Name _____ Previous Name or Aliases _____
 Address _____ City _____ State _____ Zip _____
 Home Phone _____ Cell Phone _____ Other Phone _____
 Email Address: _____ Social Security Number: _____ - _____ - _____

On what date would you be available for work? _____ Desired Wage/Salary \$ _____

Are you a U.S. citizen, or otherwise authorized to work in the U.S. without any restriction? Yes No

Have you ever been convicted of a felony? Yes No If yes, please describe circumstances:

Have you ever been involuntarily terminated or asked to resign from any position of employment?
 Yes No If yes, please describe circumstances:

Have you ever been enlisted the Armed Forces? Yes No Are you currently? Yes No

If selected for employment, are you willing to submit to a pre-employment drug screening test and any testing asked for during employment? Yes No

EDUCATION				
School Name	Location	Dates Attended	Degree Received	Major

Type of License(s) Held _____ State of _____ & License Number _____
 License Expiration Date _____

Type of License(s) Held _____ State of _____ & License Number _____
 License Expiration Date _____

Other training, certifications, or professional memberships:

List other information pertinent to the employment you are seeking:

EMPLOYMENT*(Most Recent First.)*

1. Employer _____ Position _____
 Dates Employed _____ - _____ Prior Position Held within Company (if any): _____
 Address _____ City _____ State _____ Zip _____
 Phone _____ Supervisor _____ Title _____
 Starting Wage/Salary _____ Ending Wage/Salary _____
 Duties Performed _____
 Reason for Leaving _____
 May we contact your most recent employer? [] Yes [] No

2. Employer _____ Position _____
 Dates Employed _____ - _____ Prior Position Held within Company (if any): _____
 Address _____ City _____ State _____ Zip _____
 Phone _____ Supervisor _____ Title _____
 Starting Wage/Salary _____ Ending Wage/Salary _____
 Duties Performed _____
 Reason for Leaving _____
 May we contact this employer? [] Yes [] No

3. Employer _____ Position _____
 Dates Employed _____ - _____ Prior Position Held within Company (if any): _____
 Address _____ City _____ State _____ Zip _____
 Phone _____ Supervisor _____ Title _____
 Starting Wage/Salary _____ Ending Wage/Salary _____
 Duties Performed _____
 Reason for Leaving _____
 May we contact this employer? [] Yes [] No

4. Employer _____ Position _____
 Dates Employed _____ - _____ Prior Position Held within Company (if any): _____
 Address _____ City _____ State _____ Zip _____
 Phone _____ Supervisor _____ Title _____
 Starting Wage/Salary _____ Ending Wage/Salary _____
 Duties Performed _____
 Reason for Leaving _____
 May we contact this employer? [] Yes [] No

REFERENCES

1. Name _____ Relation _____
 Address _____ City _____ State _____ Zip _____
 Phone _____ Email Address: _____

2. Name _____ Relation _____
 Address _____ City _____ State _____ Zip _____
 Phone _____ Email Address: _____

3. Name _____ Relation _____
 Address _____ City _____ State _____ Zip _____
 Phone _____ Email Address: _____

ACKNOWLEDGMENT AND AUTHORIZATION

I certify that 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.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules, regulations and standards of the employer.

Signature of Applicant

Date

Return application to: via mail Complete Design Inc., PO Box 1914, Wenatchee, WA 98807
In Person 353 Malaga-Alcoa Hwy. Suite 3; Appleyard Business Park, Wenatchee, WA 98801
Ph.: 509-662-3699 - www.completedesign.cc