



G.S. LONG CO.

APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer - All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability status, protected veteran status, or any other characteristic protected by law.

Applicant Information		
Full Name:		Date:
Street Address:		Apartment/Unit #:
City:	State:	ZIP:
Phone:	E-mail Address:	
Are you a citizen of the United States? Yes <input type="checkbox"/> No <input type="checkbox"/> If no, are you authorized to work in the U.S.? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If selected for employment, are you willing to submit to a pre-employment drug screening test? Yes <input type="checkbox"/> No <input type="checkbox"/>		

Position Information	
Position Applying For:	Date Available:
GSL Location: Yakima <input type="checkbox"/> Wenatchee <input type="checkbox"/> Oregon <input type="checkbox"/>	Can you work overtime, including weekends? Yes <input type="checkbox"/> No <input type="checkbox"/>
Employment Desired: Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Seasonal <input type="checkbox"/>	
Have you ever worked for this company? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, when?	
Do you know anyone that works for GSL? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, who?	

Education			
School Name	Location	Years Attended	Degree/ Major
High School			
College/ University			
Trade/ Business School			

References <i>Give the names of three persons not related to you, whom you have known at least three (3) years.</i>				
Full Name	Title/ Relation-ship	Company	Phone	Email

Mailing Address:

Yakima: P.O. Box 9783 Yakima, WA 98909
Wenatchee: 1012 Walla Walla Ave Wenatchee, WA 98801
Oregon: P.O. Box 129 Odell, OR 97044

Previous Employment <i>Include your last seven (7) years of employment history, including periods of unemployment, starting with the most recent and working backwards in time.</i>		
COMPANY #1:		Job Title:
Supervisor:		Phone:
Starting Pay Rate:	Ending Pay Rate:	Dates Employed:
May we contact your previous employer for a reference? Yes <input type="checkbox"/> No <input type="checkbox"/>		Reason for Leaving:
COMPANY #2:		Job Title:
Supervisor:		Phone:
Starting Pay Rate:	Ending Pay Rate:	Dates Employed:
May we contact your previous employer for a reference? Yes <input type="checkbox"/> No <input type="checkbox"/>		Reason for Leaving:
COMPANY #3:		Job Title:
Supervisor:		Phone:
Starting Pay Rate:	Ending Pay Rate:	Dates Employed:
May we contact your previous employer for a reference? Yes <input type="checkbox"/> No <input type="checkbox"/>		Reason for Leaving:
COMPANY #4:		Job Title:
Supervisor:		Phone:
Starting Pay Rate:	Ending Pay Rate:	Dates Employed:
May we contact your previous employer for a reference? Yes <input type="checkbox"/> No <input type="checkbox"/>		Reason for Leaving:

Disclaimer and Signature	
<p><i>G.S. Long Co. is an equal opportunity employer. G.S. Long Co. does not discriminate in employment on account of race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual harassment), sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service.</i></p> <p><i>I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for G.S. Long Co. to hire me. If I am hired, I understand that either G.S. Long Co. or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of G.S. Long Co. has the authority to make any assurance to the contrary.</i></p> <p><i>I attest with my signature below that I have given to G.S. Long Co. true and complete information on this application. No requested information has been concealed. I authorize G.S. Long Co. to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.</i></p>	
Signature	Date

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