



APPLICATION FOR EMPLOYMENT

Loader



EMPLOYMENT APPLICATION INSTRUCTIONS

Washington Cedar & Supply

EQUAL EMPLOYMENT OPPORTUNITY STATEMENT

Washington Cedar & Supply is an equal opportunity employer. All qualified applicants will receive consideration for employment without regard to race/ethnicity, color, religion, sex, sexual orientation, gender identity, national origin, disability, protected veteran status, age, or any other status protected by law. The objective of Washington Cedar & Supply's hiring procedure is to select the most qualified individual for the job. We encourage you to provide us with complete and accurate information that demonstrates your qualifications to perform the duties of the job you are applying for.

INVITATION TO APPLICANTS WITH A DISABILITY TO REQUEST REASONABLE ACCOMMODATION IN THE HIRING PROCESS

If you have a disability that prevents you from successfully demonstrating your qualifications in any step of the hiring process, you may request a reasonable accommodation. If you need an accommodation, please inform the branch manager as soon as possible so that we have enough time to make the necessary arrangements.

JOB AVAILABILITY

Please look at the job opening notice and job qualification requirements. You must specify the job title for which you are applying or we will not consider your application. If you want to apply for other jobs, then you must complete a separate application.

Your application will be active for 30 days. If you want to be considered for openings that occur after the 30-day period, then you must complete a new application.

RESPONDING TO INQUIRIES ON THE APPLICATION FORM

You must complete all of the inquiries on the application accurately and truthfully. If you leave an inquiry blank, we will not consider your application. If you believe a question does not apply, put "N/A" for a response in the space provided. As part of the application process, the company will verify information on your application form. If you report false, inaccurate, misleading, or incomplete information, we will reject your application or will terminate your employment if we discover such information after the date of hire.

POST-OFFER MEDICAL EXAM

Washington Cedar & Supply uses a post-offer medical exam as part of our hiring process. Any offer of employment is conditioned upon you passing the post-offer medical exam. The exam occurs after the offer of employment but before the performance of any job duties. You will be asked to sign a separate authorization to release the results of the exam from the health care provider. If you do not pass the post-offer medical exam due to a disability, we will work with you to determine if a reasonable accommodation would permit you to perform the job duties. If we cannot find a reasonable accommodation that would be effective, we will withdraw the offer of employment. We treat all medical data and information from the medical examination as a confidential medical record as required by law.



EMPLOYMENT APPLICATION ACKNOWLEDGMENT
Washington Cedar & Supply

PURPOSE OF THE APPLICATION FORM

I understand that the purpose of the application form is to give me the opportunity to provide the company with information about my skills, experience, abilities and other personal attributes that meet the qualification requirements for the job position that is available. I understand that it is in my best interest to be thorough, accurate and descriptive in providing this information. I also understand that a number of people will apply for the job opening and that Washington Cedar & Supply does not guarantee anyone an interview or consideration beyond completing the application form.

CONSIDERATION OF THE APPLICATION FORM

I understand that I must specify the position I wish to apply for, and that Washington Cedar & Supply will consider my application for that position only. I understand if I wish to apply for additional positions, then I must complete and file a separate application.

I also understand that Washington Cedar & Supply will only consider my application active for 30 calendar days from the date of my application. I understand that if I want Washington Cedar & Supply to consider me for a longer period of time, then I must complete and file a new application.

REFERENCE AND INFORMATION CHECK

In submitting this application for employment, I understand that Washington Cedar & Supply will investigate the information that I provide. If I am selected for an interview, I agree to complete a release and waiver form so that Washington Cedar & Supply may verify my employment history, education, and background as they relate to the job opening.

I understand that the company also does a background check on the driving of applicants. I understand that the company will provide me with the required notice, disclosures, and request for authorization whenever the information sought falls under the requirements of the federal Fair Credit Reporting Act.

DRUG TEST

I understand that part of the hiring process at Washington Cedar & Supply includes a drug test. I understand that any offer of employment is conditional on passing the drug test. I agree to sign any required consent and waiver form, as well as an authorization to release the results of the drug test before I take the test. I understand that if I refuse to sign the consent and waiver, or the authorization to release the results, or if my test results are positive, then Washington Cedar & Supply will withdraw the offer of employment and will not consider me for employment for 30 days, after which I may reapply. I understand that a positive test for marijuana (including marijuana metabolites) is not excused even if my use was legal under state law. I understand that I will be permanently barred from employment if the collection facility reasonably believes I have altered, substituted, or tampered with my sample. I understand all drug test data will be maintained as a confidential record and will be disclosed only to those with a business need to know.

1-9 FORM DOCUMENT

I understand I-9 documentation is not part of the application or interview process. I understand, however, that if Washington Cedar & Supply offers me a job position, then on the day that I am scheduled to begin work I must complete an I-9 form and provide Washington Cedar & Supply with documentation that shows my identity and authorization to work in the United States. I understand that if I do not provide this documentation, I will no longer be qualified for the job position. I understand that federal law imposes imprisonment and/or fines upon any person who makes a false statement, uses a document issued to someone else, or uses a counterfeit, altered, forged or falsely made document to obtain employment.

GENERAL ACKNOWLEDGMENT

I have read and understand all of the instructions and acknowledgments set forth above. My signature represents that I will comply and that I understand the consequences if I do not comply.

APPLICANT'S SIGNATURE: _____

DATE: _____



APPLICANT CONSENT TO DRUG & ALCOHOL TESTING
Washington Cedar & Supply

In consideration for my being considered for employment by Washington Cedar & Supply, I hereby give my consent to and authorize Alere Toxicology Services Inc. to perform a urinalysis test for the purpose of detecting the presence of drugs or alcohol in my system.

I understand I must also authorize in writing the release of my test results to Washington Cedar & Supply (including information obtained in the course of the testing process) for the purpose of and to the extent necessary to determine my eligibility for employment. I understand that if I refuse to authorize the release of the test results, I will be deemed to have refused to test and to have withdrawn my application for employment. To the extent allowed under state and federal law, I release and agree to hold harmless Washington Cedar & Supply from any liability for the testing process or use of the test results.

If I have a valid medical reason for a positive drug test, I understand that I may voluntarily provide information to the collection site personnel, laboratory personnel or medical review officer (for example, the names of authorized prescription drugs I am taking) to justify the positive test. I understand that the laboratory personnel or medical review officer has complete discretion to determine whether my medical reason is valid.

My refusal to sign this consent and release form will act as a withdrawal of my application for employment. I understand that Washington Cedar & Supply will not consider me for employment for six months if my test is confirmed positive, but after that time has passed, I may apply again for advertised open positions and will be considered accordingly.

I understand that I will be permanently barred from future employment with Washington Cedar & Supply or its successors, subsidiaries, parent organization, or related entities if I tamper with or adulterate my sample.

This consent is valid for the duration of my employment unless I revoke it in writing. A copy of this consent form shall be valid as an original. I acknowledge I have received a copy.

PRINT APPLICANT'S NAME: _____

APPLICANT'S SIGNATURE: _____

DATE: _____



EMPLOYMENT APPLICATION FOR LOADER
Washington Cedar & Supply

Please review the entire application before you begin. Legibility, accuracy, organization and completeness are important.

LAST NAME **FIRST NAME** **MIDDLE INITIAL**

ADDRESS where you can be contacted: _____

PHONE NUMBER where you can be contacted: _____

Job applied for: _____ Today's date: _____

Are you seeking: Full-time Part-time Temporary or Summer employment?

How soon are you available for employment? _____

What shifts are you available to work? Day Swing Night Rotating

EDUCATION—Please list any education that qualifies you for the job for which you are applying. Provide names of schools, dates of enrollment (except for high school), cities and states.

TRAINING—Have you completed any training or classes relevant to the job for which you are applying? (Examples: On-the-job safety training, military training, production training, etc.) Be specific.

SPECIAL SKILLS—Do you have any special skills or experiences that are relevant to the job for which you are applying? (Examples: Experience operating plant or office machines, computer skills, experience in warehouse jobs, skills in maintaining or repairing office or plant machines, etc.) Be specific.

EXPERIENCE & ACTIVITIES—We want employees to advance. Describe any job experience, school or other activities that demonstrate your desire and ability to advance or learn new skills.

Have you ever worked for this company before? Yes No If yes, when? _____

In what job position(s)? _____

WORK EXPERIENCE—Please list your work experience beginning with your most recent job held. If you were self-employed, give company name.

Employer: _____ Phone: _____

Address: _____

Name of Last Supervisor: _____

Employment Dates | *From:* _____ *To:* _____

Rate of Pay | *Start:* _____ *Final:* _____

Your Last Job Title: _____

Reason for Leaving: _____

List jobs you held, duties performed, skills used or learned, advancements or promotions while you worked for this employer.

Employer: _____ Phone: _____

Address: _____

Name of Last Supervisor: _____

Employment Dates | *From:* _____ *To:* _____

Rate of Pay | *Start:* _____ *Final:* _____

Your Last Job Title: _____

Reason for Leaving: _____

List jobs you held, duties performed, skills used or learned, advancements or promotions while you worked for this employer.

Employer: _____ Phone: _____

Address: _____

Name of Last Supervisor: _____

Employment Dates | *From:* _____ *To:* _____

Rate of Pay | *Start:* _____ *Final:* _____

Your Last Job Title: _____

Reason for Leaving: _____

List jobs you held, duties performed, skills used or learned, advancements or promotions while you worked for this employer.

Employer: _____ Phone: _____

Address: _____

Name of Last Supervisor: _____

Employment Dates | *From:* _____ *To:* _____

Rate of Pay | *Start:* _____ *Final:* _____

Your Last Job Title: _____

Reason for Leaving: _____

List jobs you held, duties performed, skills used or learned, advancements or promotions while you worked for this employer.

REFERENCES—Please list three references who can provide us with information about your qualifications to perform the job for which you are applying. Business or job-related references are preferable.

Name: _____ Phone: _____

Address: _____

Occupation: _____

Name: _____ Phone: _____

Address: _____

Occupation: _____

Name: _____ Phone: _____

Address: _____

Occupation: _____

May we contact your present employer? Yes No, because (Please state reason)

CERTIFICATION—My signature below certifies that all information in this application is correct and complete to the best of my knowledge and belief and that I understand that providing false, inaccurate, incomplete, or misleading information will result in refusal of employment or termination of employment if discovered after date of hire. I acknowledge that the company will verify the accuracy and completeness of the information I have provided and I authorize all entities and individuals identified or discovered during the company's hiring process to provide information regarding my employment, education, character and qualifications. I release all entities and individuals who provide information in accordance with this release from all liability for any damages that may result from furnishing information to the company. I understand that if I am employed, I must conform to the company's rules, policies and procedures. I also understand that my employment is "at will," which means that the company or I may terminate my employment at any time for any reason.

Applicant's Signature: _____ Date: _____



Washington Cedar & Supply

I hereby give Washington Cedar & Supply the right to make a thorough investigation of my past employment, education, and activities, and I release from all liability all persons, companies, and corporations supplying such information. I indemnify Washington Cedar & Supply against any liability that may result from such investigation. I understand that any false statement or other required document may result in denial of employment or discharge.

Additionally, I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between Washington Cedar & Supply and myself for any term of employment or for the providing of any benefit. No promises regarding employment have been made to me and I understand that no such promise or guarantee is binding upon Washington Cedar & Supply unless in writing. I further understand that no agent or representative other than the supervisor of the position being applied for at Washington Cedar & Supply has the authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing.

If an employment relationship is established, I 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 Washington Cedar & Supply or myself.

PRINT APPLICANT'S NAME: _____

APPLICANT'S SIGNATURE: _____

DATE: _____