



WESTTECH RIGGING SUPPLY

div of WESTERN WIRE ROPE, INC.

4140 West 11th Avenue
Eugene, Oregon 97402
TEL 541-344-6249
FAX 541-338-4931

2439 McGilchrist St SE
Salem, Oregon 97302
TEL 503-399-7037
FAX 503-399-7047

EMPLOYMENT APPLICATION

APPLICANT INFORMATION

Last Name: Shelton		First Name: Prescott		MI:	Date:
Street Address:			Apt/Unit #:		
City:		State:		Zip:	
Phone:		E-mail address:			
Date Available:			Salary Desired:		
Position Applied for:					
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"/>	YES <input type="checkbox"/>	
Have you ever worked for this company?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?	
Have you ever been convicted of a felony?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain:	

EDUCATION

High School:		Address:			
From:	To:	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree:
College:		Address:			
From:	To:	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree:
Other:		Address:			
From:	To:	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree:

REFERENCES

Please list three professional references:

Full Name:		Title
Company:		Phone ()
Address:		
Full Name:		Title
Company:		Phone ()
Address:		
Full Name:		Title
Company:		Phone ()
Address:		

PREVIOUS EMPLOYMENT

Company:		Phone ()	
Address:			
Job Title:	Starting Salary \$	Ending Salary \$	
Responsibilities:			
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
If no, please explain:			

Company:		Phone ()	
Address:			
Job Title:	Starting Salary \$	Ending Salary \$	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
If no, please explain:			

Company:		Phone ()	
Address:			
Job Title:		Ending Salary \$	
Responsibilities:			
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
If no, please explain:			

MILITARY SERVICE

Branch:	From:	To:
Rank at Discharge:	Type of Discharge:	
If other than honorable, please explain:		

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information my application or interview may result in my release.

Signature:	Date:
------------	-------

BACKGROUND CHECK

I hereby authorize WESTECH RIGGING SUPPLY to conduct a background check which indicates and is not limited to credit, prior employment, military and criminal records.

Signature:	Date:
------------	-------