



Employment Application

Evergreen Plastic Container
 Human Resources Department
 6501 NE 47th Ave
 Vancouver WA 98661
 Email: HR@evergreenplastic.com
 Website: www.evergreenplastic.com

HR Use Only

By: _____

Date: _____

An Equal Opportunity Employer

Important Information about the Application Process

Carefully read the job announcement for the position you are applying for. Applicant materials and communications will be considered as determined appropriate by EPC during our screening and selection process. Therefore, it is important that all materials be accurate, neat and complete. Once received, all application materials become the property of EPC. Incomplete or late application materials will not be considered.

Employment with EPC is at-will and may require transfer to different shifts or work locations. In the case of some positions, this may include overtime or evening, weekend or holiday hours. In accepting employment with EPC, you are affirming your ability to accept such transfers and hours.

In accordance with Federal law proof of identity and proof of authorization to work in the United States is required upon employment. This may also include individuals who have the right to work under an employment visa or similar document.

Unless otherwise stated in the job announcement, only complete Employment Applications will be considered in the selection process. All materials submitted along with your application become property of EPC and will be used in our selection process. By signing this application you are affirming that all information you provide is accurate and complete.

Applications are considered active for 90 calendar days. We accept applications only for positions which are currently posted.

PLEASE TYPE OR PRINT CLEARLY. NO FAXES WILL BE ACCEPTED!

A separate application must be submitted for each position you are applying for.

Applicant Information

| | | | |
|------------------------|-----------------------|----------------------|--|
| Position Applying For: | | Date of Application: | |
| First Name: | Middle Name: | Last Name: | |
| SSN: | DOB: ____/____/____ | Driver License: | |
| Address: | | | |
| City: | State: | Zip Code: | |
| Email Address: | | | |
| Home Phone: | | Cell Phone: | |
| Day time Phone: | Other names known by: | | |

Employment History

Be sure to describe in this section the duties you have performed which demonstrate that you have the knowledge and skills to perform the duties of the job for which you are applying. You may include on-the-job training, internship, volunteer activity, self-employment, and military experience.

Begin with your most recent job or assignment first and list each job separately, extending for a period of 10 years. Additional pages of work history may be attached if necessary. A resume, while strongly encouraged, is not a substitute for this application unless otherwise noted in the job announcement.

| | | |
|---|---|---------------------------|
| Current or most Recent Job Title: | Start Date: | End Date: |
| Employer Name: | Phone: | |
| Employer Address: | | |
| If this is your current employer may we contact them if you become a finalist for this position? Yes No | | |
| Supervisor: | Number of people you supervised in this position: | |
| Starting salary: | Ending salary: | |
| Reason for Leaving: | | |
| Primary job Duties: | | |
| Job Title: | Start Date: | End Date: |
| Employer Name: | Phone: | |
| Employer Address: | | |
| May we contact them | Yes | No If no, why: |
| Supervisor: | Number of people you supervised in this position: | |
| Starting salary: | Ending salary: | |
| Reason for Leaving: | | |
| Primary job Duties: | | |

| | | | |
|---|--|---|-----------|
| Job Title: | | Start Date: | End Date: |
| Employer Name: | | Phone: | |
| Employer Address: | | | |
| May we contact them Yes No If no, why: | | | |
| Supervisor: | | Number of people you supervised in this position: | |
| Starting salary: | | Ending salary: | |
| Reason for Leaving: | | | |
| Primary job Duties: | | | |
| Job Title: | | Start Date: | End Date: |
| Employer Name: | | Phone: | |
| Employer Address: | | | |
| May we contact them Yes No If no, why: | | | |
| Supervisor: | | Number of people you supervised in this position: | |
| Starting salary: | | Ending salary: | |
| Reason for Leaving: | | | |
| Primary job Duties: | | | |
| Job Title: | | Start Date: | End Date: |
| Employer Name: | | Phone: | |
| Employer Address: | | | |
| May we contact them Yes No If no, why: | | | |
| Supervisor: | | Number of people you supervised in this position: | |
| Starting salary: | | Ending salary: | |
| Reason for Leaving: | | | |
| Primary job Duties: | | | |

| | | | |
|---|--|---|-----------|
| Job Title: | | Start Date: | End Date: |
| Employer Name: | | Phone: | |
| Employer Address: | | | |
| May we contact them Yes No If no, why: | | | |
| Supervisor: | | Number of people you supervised in this position: | |
| Starting salary: | | Ending salary: | |
| Reason for Leaving: | | | |
| Primary job Duties: | | | |
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| Supervisor: | | Number of people you supervised in this position: | |
| Starting salary: | | Ending salary: | |
| Reason for Leaving: | | | |
| Primary job Duties: | | | |

Education, Training, Certificates & Licenses

Do you have a high school diploma, GED or equivalent? Yes No

| Name of School | Location | Major Subject | Degree or Certificate Earned | Year |
|----------------|----------|---------------|------------------------------|------|
| | | | | |
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| | | | | |

Personal Reference

Please provide two (2) non-related references we may contact who are NOT former supervisors.

| Name | Phone # | Email | Relationship | Years |
|------|---------|-------|--------------|-------|
| | | | | |
| | | | | |

General Information

- | | | |
|---|------------------------------|-----------------------------|
| 1. Do you have a car with a valid driver's license? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 2. Are you eligible to work in the United States? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 3. Can you pass a drug test? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 4. Have you been convicted of a felony within the last five years? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 5. If yes, please explain: _____ | | |
| 6. Have you ever been fired? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 7. If yes, please explain: _____ | | |
| 8. Do you expect to be engaged in any other business or employment while working for EPC? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| If yes, please explain: _____ | | |

Certification of Information, Authorization & Release

BY MY SIGNATURE BELOW, I:

Certify that I have fully and accurately answered all questions and have given all information requested in this application for employment, and I understand that any wrong or incomplete information on the form may disqualify me for further consideration for employment or, if discovered after I am hired, may be grounds for my immediate dismissal;

Agree to undergo any type of drug and/or alcohol testing that EPC may require at any time;

Authorize Evergreen Plastic Container (EPC) to perform a criminal background check, contact my prior employers, educational institutions, references, and any institution or organization with whom I have been associated to give EPC any pertinent information about my employability;

Release the individual, company, institution or organization and all individuals connected therewith from all liability whatsoever incurred in giving such information; and further release Evergreen Plastic Container, its employees, and agents from all liability and/or claims whatsoever related to obtaining and/or using such information;

Finally, I Understand and Agree that submission of this application does not necessarily mean that I will be hired, and that if I am hired, my employment will be at will, and either I or EPC may terminate my employment at any time, with or without notice or reason.

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|-------------------------------|-------------|
| Signature of Applicant: _____ | Date: _____ |
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