



An Equal Opportunity Employer committed to excellence through diversity.

Please type or print clearly. The application must be fully completed to be considered. Complete each section even if you attach a resume.

Personal Information

Name		Social Security Number	
Address		City	State Zip
Phone Number	Mobile Number	Email Address	
Previous Address If Under 3 Years		City	State Zip
Are You At Least 18 Years of Age? Yes <input type="checkbox"/> No <input type="checkbox"/>		If Under 18, Do You Have A Work Permit? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Can you provide proof that you can be lawfully employed in the US? Yes <input type="checkbox"/> No <input type="checkbox"/>		Have You Ever Been Convicted Of A Felony? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, Please Explain:	
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

Position You Are Applying For	Available Start Date	Desired Pay
Location <input type="checkbox"/> Spokane <input type="checkbox"/> Yakima <input type="checkbox"/> Lewiston		
Employment Desired <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Seasonal/Temporary		
Preferred Schedule <input type="checkbox"/> Day Shift <input type="checkbox"/> Evening Shift <input type="checkbox"/> Night Shift <input type="checkbox"/> Weekends <input type="checkbox"/> Variable Shifts		
Have you applied for work here before? Yes <input type="checkbox"/> No <input type="checkbox"/>		If Yes, When? _____
Were you referred by someone? Yes <input type="checkbox"/> No <input type="checkbox"/>		If Yes, Who? _____

EMPLOYMENT APPLICATION

Education

School Name	Location	Years Attended	Degree Received	Major

Employment History

Begin With Your Most Recent Employer

Employer (1)	Work Phone	Start Date & End Date (MM/YY)	
Job Title	Starting Pay Rate	Ending Pay Rate	
Address	City	State	Zip
List Job Duties, Skills Used			
Reason for Leaving			

Employer (2)	Work Phone	Start Date & End Date (MM/YY)	
Job Title	Starting Pay Rate	Ending Pay Rate	
Address	City	State	Zip
List Job Duties, Skills Used			
Reason for Leaving			

Employer (3)	Work Phone	Start Date & End Date (MM/YY)	
Job Title	Starting Pay Rate	Ending Pay Rate	
Address	City	State	Zip
List Job Duties, Skills Used			
Reason for Leaving			

Licenses, Certifications, Skills And Qualifications

List Licenses, Certifications, Skills, Qualifications, or Experience Applicable To The Position You're Applying For

References

Name	Title	Company	Phone

Volunteer Activities And Experience

List the Organization, your title(s), duties, and skills used.

Signature Disclaimer

I hereby affirm that the information provided on this application and accompanying letters or resume is true and complete.

I also agree and understand that any false or misleading information or significant omissions may disqualify me from consideration for employment or result in immediate dismissal.

I authorize Wilbert Precast, Inc. to investigate my background thoroughly, including a full credit report, and agree to assist in such investigation. I release, hold harmless, and promise not to claim damages from any of my prior employers listed above for providing information. I agree to submit to any drug or alcohol test that may be required by Wilbert Precast for my hiring or continued employment. I understand that refusal to take such tests may be cause for denial of employment or my termination. I also understand that employment may be conditioned upon an investigation into criminal convictions on record with local, state, or federal law enforcement authorities.

I understand that, if hired, my employment is not for any specific period or duration and is terminable at will by the employer or me at any time with or without cause or notice. I understand this application is NOT A CONTRACT.

I agree to present personal photo identification and proof of U.S. citizenship or documentation of my authorization to work and reside in the United States promptly upon confirmation of hiring, and that failure to do so voids any offer of employment.

I understand that employment may be contingent upon a post-offer physical examination by a medical doctor.

Upon offer of employment, I authorize the examining doctor, clinic, or organization to release to Wilbert Precast, Inc. any information requested to assess my ability to perform essential work functions or to assess potential risk of injury to myself or others.

Name (Please Print)	Signature
Date	

Applications are active for only 60 days (or until the current hiring process closes, whichever is later).

Due to the number of applications we receive, we cannot notify every applicant not selected. Only those selected for further interview will be called.