



# APPLICATION FOR EMPLOYMENT

*HREC is an equal opportunity employer. HREC does not discriminate in employment on account of race, color, religion, national origin, citizenship status, ancestry, age, sex, sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service.*

*Please complete all fields. Incomplete or inaccurate information could disqualify you from further consideration. You may also attach a resume or provide other information that you feel would be beneficial in helping HREC evaluate your qualifications for the position you are seeking.*

## PERSONAL INFORMATION

Name

Date

If you have worked or gone to school under a different name, please provide it for employment/education date verification and reference checking purposes

Mailing Address

Physical Address

E-mail Address

Home Phone

Mobile Phone

Are you legally eligible for employment in the United States?      Yes      No

*Note: All successful applicants will be required to provide proof of identity and eligibility for employment.*

Are you 18 years of age or older?      Yes      No

Have you ever been terminated from employment or asked to resign by an employer?      Yes      No

If Yes, please provide company names and details

Can you work any shift?      Yes      No

Days and hours available:

Can you work overtime, including weekends?      Yes      No

Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation?      Yes      No

## EMPLOYMENT DESIRED

Position desired

Full Time

Part Time

Date you can start

Hourly Rate/Salary desired

## REFERRAL SOURCE

How did you hear about this job?

HREC Website/Facebook

Newspaper

Other

Do you have any relatives or friends who work for HREC?      Yes      No

If yes, who?

**EMPLOYMENT HISTORY** Start with your current or most recent position. Include your last seven (7) years of employment history, including periods of unemployment. Incomplete information could disqualify you from further consideration. Use additional sheets if needed.

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**Employer** Telephone

Address

Position Title Supervisor

Are you currently employed here? Yes No May we contact this employer? Yes No

Start Date End Date

Duties

Reason for Leaving:

HREC Use Only:  Dates Verified  Position Verified

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**Employer** Telephone

Address

Position Title Supervisor

Start Date End Date

Duties

Reason for Leaving:

HREC Use Only:  Dates Verified  Position Verified

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**Employer** Telephone

Address

Position Title Supervisor

Start Date End Date

Duties

Reason for Leaving:

HREC Use Only:  Dates Verified  Position Verified

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**OTHER QUALIFICATIONS**

What languages are you fluent in? English Spanish Other

Other related skills, experience and/or training

Computer Skills

## EDUCATION

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High School

Address

Highest Grade Completed

Degree/Diploma

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College or Technical School

Address

Course(s) of Study

Number of Years Completed

Degree/Diploma

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Other Schooling or Training

Address

Course(s) of Study

Number of Years Completed

Degree/Diploma

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**REFERENCES** List three people who are not related to you, whom you have known for at least three years.

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Name

Company

Phone

Email

Occupation

Years Known

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Name

Company

Phone

Email

Occupation

Years Known

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Name

Company

Phone

Email

Occupation

Years Known

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**Release and Consent. Please read carefully before signing.**

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for HREC to hire me. I understand that no representative of HREC has the authority to make any assurance to the contrary.

I attest with my signature below that I have given to HREC true and complete information on this application, on any attached resume or supplemental materials, and that no requested information has been concealed. I authorize HREC to contact the 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 result in the denial of employment or immediate dismissal.

I authorize HREC to conduct a thorough background investigation of my work and personal history, and to verify all data given on this application and during interviews. I authorize all persons, schools, companies, and/or their representatives to furnish verification to HREC, its representatives or agents, any and all information set forth in this application and any attached resume or supplemental materials. I hereby agree to release from all liability and hold harmless all said persons, schools, companies, employers, and/or their representatives from any and all claims that may arise as a result of them furnishing information to HREC.

If I am offered employment, I agree to take any physical examination and pre-employment tests, including drug screening tests, requested by HREC as a condition of employment. All such tests will be administered in compliance with the Americans with Disabilities Act. I further understand that I will be required to pass a criminal history check and may also be required to pass a driver's record check and a credit check as a condition of being hired, depending upon the position for which I am applying and consistent with applicable laws.

If I am hired, I understand that my employment with HREC is at-will, meaning that either HREC or I can terminate my employment at any time without prior notice, or for any reason consistent with applicable state or federal law.

I authorize HREC, should they employ me, to release employment references if my employment is terminated for any reason.

Signature

Date

**Please return your completed application to HREC via one of the methods below:**

**Mailing Address**

PO Box 125  
Odell, OR 97044

**Physical Address**

3521 Davis Drive  
Hood River, OR 97031

**Email:** [jobs@hrec.coop](mailto:jobs@hrec.coop)

**Fax:** (541) 354-2229

***THIS APPLICATION IS VALID ONLY FOR 90 DAYS FROM THE DATE SIGNED/DATED ABOVE.***