

Fast track - Employment Application Return Application to: Suzie Martin, HR Assistant smartin@frereslumber.com | 503-859-2121 141 14th St, Lyons OR 97358

		Applicant into	rmation		
Full Name:			Date:		
	Last	First	M.I.		
Address:					
	Street Address	_		Apartment/Unit #	
	City		State	ZIP Code	
Phone:		Ema	ail		
Date Avail	lable:	Position Applied For:			
Are you a	citizen of the Unite	YES NO d States?	are you authorized to wo	YES NO ork in the U.S.?	
Are you wishifts?	illing to work rotatir		NO		
Are you w	illing to work weeke		NO		
Were you	referred by a curre	YES nt Freres employee?	NO Name of Employee:		
,	,	, ,			
		Education	on		
High Scho	ool:	City,	State:		
From:	To:	Did you graduate? □	YES NO] Diploma 🔲 GED	
College:		City,	State:		
From:	To:	YI Did you graduate? [ES NO		
		Did you graduate.			
Other/Trac	de School/Certificat	es:			
Diese Her		References (C			
	·	eferences or people who hav	•		
				hip:	
				one:	
			Dha	hip:	
Company:	·		Pho	one:	

Previous Employment: Last Two Employers							
Company:			Phone:				
Job Title & Responsibilities:							
From:							
Company:			Phone:				
Job Title & Responsibilities:							
From:	To:						
Employee EEO Data							
RACE/ETHNICITY:							
☐ Hispanic/Latino	☐ Asian	☐ Caucasian	African American				
☐ Native Hawaiian or Other Pacific Islander	☐ American Indian or Alaska Native	Other:	☐ I do not wish to specify				
GENDER:							
☐ Male	☐ Female	☐ Non-Binary	☐ I do not wish to specify				
PROTECTED VETERAN STATUS:							
☐ I identify as one or more of the classifications of protected veterans							
☐ I am NOT a protected veteran							
☐ I do not wish to specify							
	5 : 1:						
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 in my application or interview may result in my release.							
Applicant understands that Freres Lumber Co. is an Equal Opportunity Employer and committed to excellence through diversity. In order to ensure this application is acceptable, please print or type with the application being fully completed in order for it to be considered.							
Signature:			Date:				