

| 509-664-0614                     |
|----------------------------------|
| alpinehighwc.com                 |
| P.O. Box 652 Wenatchee, WA 98801 |

| Date |  |  |  |
|------|--|--|--|
|      |  |  |  |

| History   |                         | EMPLOYMENT APPLICATION  |                                |                         |  |          |                      |                                       |                                       |             |                 |                        |  |
|---|-------------------------|---|--------------------------------|-------------------------|--|----------|----------------------|---------------------------------------|---------------------------------------|-------------|-----------------|------------------------|--|
|   | Full Name               |   |                                |                         |  | E-Mail   |                      |                                       |                                       | Te          | Tel#            |                        |  |
|   | Ad                      | Address   |                                |                         |  |          | City, State, Zip     |                                       |                                       |             |                 |                        |  |
| ation   |                         |   |                                |                         |  |          |                      |                                       |                                       |             |                 |                        |  |
| About You and Your Education History                                    | Hi                      | High School   |                                |                         |  |          | College              |                                       |                                       |             |                 |                        |  |
|   | Cit                     | City, State   |                                |                         |  |          | City, State          |                                       |                                       |             |                 |                        |  |
|   | La                      | Last Grade Completed  |                                |                         |  |          | Last Grade Completed |                                       |                                       |             |                 |                        |  |
| You   | U.                      | U.S. Citizen: Yes No No   |                                |                         |  |          | Social Security#     |                                       |                                       |             |                 |                        |  |
| About   |                         | If no, type of Visa:<br>Alien Registration#   |                                |                         |  |          |                      |                                       |                                       |             |                 |                        |  |
|   | 1                       | What Position are you applying for?   |                                |                         |  |          |                      | Check One:<br>Full Time ☐ Part Time ☐ |                                       |             |                 |                        |  |
|   |                         | State All   | Γhe Hou                        | rs You                  | ı Are Ava  | ilabl    | le To V              | Vork In                               | The Chart Be                          | elow        |                 |                        |  |
| Availabl  | Available SUNDAY MONDAY |   | TUESDAY                        |                         | WEDI   | NESDAY   | THURDSAY F           |                                       | RIDAY SATURDAY                        |             |                 |                        |  |
| From  | m                       |   |                                |                         |  |          |                      |                                       |                                       |             |                 |                        |  |
| То  |                         |   |                                |                         |  |          |                      |                                       |                                       |             |                 |                        |  |
| tory<br>loy-  | Em                      | Employer Name and Address<br>Salary   |                                | Date<br>To-fro          | 71   |          |                      | Pay                                   | Supervis<br>Name                      | I           |                 | n For Leaving          |  |
| Your Employment History<br>List Most Recent Employ-<br>ment             |                         |   |                                |                         |  |          |                      |                                       |                                       |             |                 |                        |  |
| mployme<br>ost Recen<br>ment  |                         |   |                                |                         |  |          |                      |                                       |                                       |             |                 |                        |  |
| Your E<br>List Me   |                         |   |                                |                         |  |          |                      |                                       |                                       |             |                 |                        |  |
| IM  | IPO                     | RTANT NOTI  | CE: Wo                         | rking P                 | apers or a   | Birt     | h Certi              | ficate M                              | Iay be Require                        | d Prio      | r to Emp        | loyment                |  |
| Drivers L<br>Can you p<br>Have you                                      | icens<br>rovi<br>ever   | de proof of your of been convicted of   | driving recof a misde          | cord? Y                 | esNo_  | <u> </u> | Do                   | you hav                               | pply proof of ag<br>re accidents of y |             | No_<br>ord? Yes | No                     |  |
| If Yes provide the dates and detail(Continue on reverse side if needed) |                         |   |                                |                         |  |          |                      |                                       |                                       |             |                 |                        |  |
| ered sufficie<br>shall comply   | nt cau<br>with          | in my application for one see for dismissal. I agree Alpine High Window out regard to age, sex, | e that all ind<br>Cleaning's F | ividuals s<br>lequireme | upplying information in the interest of the in | mation   | n, for refe          | rence purpo                           | ses are released fron                 | ı liability | . If a job opp  | portunity is offered I |  |