



# Hood River Juice Company, Inc.

550 Riverside Drive  
Hood River OR 97031  
541-386-3003 jobs@hrjco.com

*We are an Equal Opportunity Employer*

## EMPLOYMENT APPLICATION

### APPLICANT INFORMATION

Date: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I.: \_\_\_\_\_

Address: \_\_\_\_\_ Apt/Unit Number: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Date Available: \_\_\_\_\_ Position Applied For: \_\_\_\_\_

What type of position are you looking for?  Full Time  Part Time  Seasonal

I am 18 years of age or older:  Yes  No

Can you perform the essential functions of the position with or without accommodations:  Yes  No

For Production positions - what shift(s) are you willing to work?

Any  Morning (4:00 a.m.-12:00 p.m.)

Mid (12:00 p.m.-8:00 p.m.)  Graveyard (8:00 p.m.-4:00 a.m.)

Can you work overtime, including weekends?  Yes  No

Are you legally authorized to work in the United States for Hood River Juice Company? Or Little King

Transportation?  Yes  No

I have previously applied to Hood River Juice Company or Little King Transportation?  Yes  No

If Yes, when: \_\_\_\_\_

I have previously worked for Hood River Juice Company or Little King Transportation?  Yes  No

If Yes, when: \_\_\_\_\_

Referred by: \_\_\_\_\_

**All potential employees will be required to submit to a pre-employment drug screening and background check as a condition of employment. Unsatisfactory results, refusal to cooperate with, or any attempt to affect the results of the pre-employment test or check, will result in withdrawal of any employment offer or termination if already employed.**

**EDUCATION**

High School: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
 Address: \_\_\_\_\_ Did you graduate?  Yes  No

College: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
 Address: \_\_\_\_\_ Did you graduate?  Yes  No  
 Degree: \_\_\_\_\_

Other: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
 Address: \_\_\_\_\_ Did you graduate?  Yes  No  
 Degree/Certifications: \_\_\_\_\_

General - Subjects of special study or research work: \_\_\_\_\_

**SKILLS AND QUALIFICATIONS**

Job related skills (professional licenses, special skills, etc.): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Types of computers, software, and other equipment you are qualified to operate or repair: \_\_\_\_\_  
 \_\_\_\_\_

**MILITARY SERVICE**

Branch: \_\_\_\_\_ Rank at Discharge: \_\_\_\_\_  
 Are you presently a member in the National Guard or Reserves:  Yes  No

**PREVIOUS EMPLOYMENT**

Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_  
 Job Title: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
 Supervisor's Name: \_\_\_\_\_  
 Responsibilities: \_\_\_\_\_  
 Reason For Leaving: \_\_\_\_\_  
 May we contact your previous supervisor for references?  Yes  No

Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_  
 Job Title: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
 Supervisor's Name: \_\_\_\_\_  
 Responsibilities: \_\_\_\_\_  
 Reason For Leaving: \_\_\_\_\_  
 May we contact your previous supervisor for references?  Yes  No

PREVIOUS EMPLOYMENT (Continued)

Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Job Title: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_  
Responsibilities: \_\_\_\_\_  
Reason For Leaving: \_\_\_\_\_  
May we contact your previous supervisor for references?  Yes  No

REFERENCES

*Please list professional references only*

<u>Name</u>	<u>Occupation</u>	<u>Phone Number</u>	<u>Email Address</u>
_____	_____	_____	_____
_____	_____	_____	_____

DISCLAIMER AND SIGNATURE

*Please read carefully before signing*

I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated.

In consideration of my employment, I agree to conform to Hood River Juice Company's (HRJCO) rules and regulations, and policies and procedures. I agree that my employment with HRJCO is at will and can be terminated at any time, with or without cause or notice, at either my or the company's discretion. I understand that the terms and conditions of my employment can be changed at any time by HRJCO and that pursuant to employment I will be subject to a background check and drug screening.

*I understand and agree to the information shown above.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Hood River Juice Company is an equal opportunity employer that is committed to diversity and inclusion in the workplace. We prohibit discrimination and harassment of any kind based on race, color, sex, religion, sexual orientation, national origin, disability, genetic information, pregnancy, or any other protected characteristic as outlined by federal, state, or local laws.**