



AMERICAN FREIGHT INC

Print

SUBMIT

2399 Merry Ln. White City, OR 97503
541-826-5277 Office / 541-826-5176 Fax / humanresources@afimartin.com

We are an equal opportunity employer, dedicated to a policy of nondiscrimination in employment on any basis including race, color, age, sex, religion, disability, or national origin.

AFI EMPLOYMENT APPLICATION												
Last Name			First			M.I.		Date				
Street Address					Apartment/Unit #							
City				State		ZIP						
Phone (s)				E-mail Address								
Date Available			SSN		- -		Desired Salary		\$			
Position Applied for												
Are you a citizen of the United States?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If no, are you authorized to work in the U.S.?			YES <input type="checkbox"/>		NO <input type="checkbox"/>
Have you ever worked for this company?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If so, when?					
Type of Employment Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Summer <input type="checkbox"/> Temporary <input type="checkbox"/>												
EDUCATION AND OFFICE SKILLS												
High School			Address									
From		To	Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>					
College or Trade School			Address									
From		To	Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree			
EMPLOYMENT HISTORY (LIST PRESENT OR MOST RECENT POSITIONS FIRST)												
Company					Phone							
Address					Name and Position of Supervisor							
Job Title				Starting Salary		\$		Ending Salary		\$		
Responsibilities												
From		To	Reason for Leaving									
May we contact your previous supervisor for a reference?					YES <input type="checkbox"/>		NO <input type="checkbox"/>					

EMPLOYMENT HISTORY (CONTINUED)

Company				Phone		
Address				Name and Position of Supervisor		
Job Title			Starting Salary	\$	Ending Salary	\$
Responsibilities						
From		To		Reason for Leaving		
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>	

Company				Phone		
Address				Name and Position of Supervisor		
Job Title			Starting Salary	\$	Ending Salary	\$
Responsibilities						
From		To		Reason for Leaving		
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>	

Company				Phone		
Address				Name and Position of Supervisor		
Job Title			Starting Salary	\$	Ending Salary	\$
Responsibilities						
From		To		Reason for Leaving		
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>	

MILITARY SERVICE

Branch				From		To	
Rank at Discharge				Type of Discharge			
If other than honorable, explain							

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.

Signature				Date		
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