

PO Box 508  
Merrill, OR 97633  
(541) 798-5660  
(541) 798-1674 Fax

5957 Crater Lake Hwy  
Central Point, OR 97502  
(541) 776-4053  
(541) 776-2457 Fax

63055 Corporate PL  
Bend, OR 97701  
(541) 633-7671  
(866) 253-1695 Fax

PO Box M  
Madras, OR 97741  
(541) 475-6116  
(541) 475-2075 Fax

43428 Hwy 299 E  
Fall River Mills, CA 96028  
(530) 336-5549  
(530) 336-6728 Fax

## Employment Application

# FLOYD A BOYD CO

### Applicant Information

|            |  |  |  |       |  |
|------------|--|--|--|-------|--|
| Full Name: |  |  |  | Date: |  |
|------------|--|--|--|-------|--|

*Last*

*First*

*M.I.*

|          |  |
|----------|--|
| Address: |  |
|----------|--|

*Street Address*

*Apartment/Unit #*

|  |  |  |
|--|--|--|
|  |  |  |
|--|--|--|

*City*

*State*

*ZIP Code*

|            |                 |
|------------|-----------------|
| Phone: ( ) | E-mail Address: |
|------------|-----------------|

|                 |                      |                    |
|-----------------|----------------------|--------------------|
| Date Available: | Social Security No.: | Desired Salary: \$ |
|-----------------|----------------------|--------------------|

|                       |                       |   |                             |
|-----------------------|-----------------------|---|-----------------------------|
| Position Applied for: | Are you now employed? | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/> |
|-----------------------|-----------------------|---|-----------------------------|

|   |                              |                             |  |   |                             |
|---|------------------------------|-----------------------------|--|---|-----------------------------|
| 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 checked="" type="checkbox"/> | NO <input type="checkbox"/> |
|---|------------------------------|-----------------------------|--|---|-----------------------------|

|  |                              |                             |               |
|--|------------------------------|-----------------------------|---------------|
| Have you ever worked for this company? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | If yes, when? |
|--|------------------------------|-----------------------------|---------------|

|   |                              |                             |
|---|------------------------------|-----------------------------|
| Have you ever been convicted of a felony? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
|---|------------------------------|-----------------------------|

|                  |
|------------------|
| If yes, explain: |
|------------------|

### Education

|              |          |
|--------------|----------|
| High School: | Address: |
|--------------|----------|

|       |     |                   |                              |                             |         |
|-------|-----|-------------------|------------------------------|-----------------------------|---------|
| From: | To: | Did you graduate? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Degree: |
|-------|-----|-------------------|------------------------------|-----------------------------|---------|

|          |          |
|----------|----------|
| College: | Address: |
|----------|----------|

|       |     |                   |                              |                             |         |
|-------|-----|-------------------|------------------------------|-----------------------------|---------|
| From: | To: | Did you graduate? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Degree: |
|-------|-----|-------------------|------------------------------|-----------------------------|---------|

|        |          |
|--------|----------|
| Other: | Address: |
|--------|----------|

|       |     |                   |                              |                             |         |
|-------|-----|-------------------|------------------------------|-----------------------------|---------|
| From: | To: | Did you graduate? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Degree: |
|-------|-----|-------------------|------------------------------|-----------------------------|---------|

### References

*Please list three professional references.*

|            |               |
|------------|---------------|
| Full Name: | Relationship: |
|------------|---------------|

|          |            |
|----------|------------|
| Company: | Phone: ( ) |
|----------|------------|

|          |
|----------|
| Address: |
|----------|

|            |               |
|------------|---------------|
| Full Name: | Relationship: |
|------------|---------------|

|          |            |
|----------|------------|
| Company: | Phone: ( ) |
|----------|------------|

|          |
|----------|
| Address: |
|----------|

|            |               |
|------------|---------------|
| Full Name: | Relationship: |
|------------|---------------|

|          |            |
|----------|------------|
| Company: | Phone: ( ) |
|----------|------------|

|          |
|----------|
| Address: |
|----------|

**Previous Employment**

|  |                              |                             |
|--|------------------------------|-----------------------------|
| Company:   | Phone: ( )                   |                             |
| Address:   | 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:   | 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"/> |

**Special Skills, Training or Achievements**

List any special training or skills that you would like us to know about:

Civic & Community Involvement:

Do you speak more than one language? YES  NO  What ones?

Any other General Information you would like to list:

**Military Service**

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

**Disclaimer and Signature**

*I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may regardless of date of payment of my wages and salary, be terminated at any time without any previous notice.*

|            |       |
|------------|-------|
| Signature: | Date: |
|------------|-------|