# Oregon Precision Manufacturing, Inc. / Lotus Precision Coating, Inc.

## APPLICATION FOR EMPLOYMENT

Note: Incomplete information could disqualify you from further consideration. Please fully complete the requested information, being as accurate as possible.

Applicant Name	Position	
PERSONAL INFORMATION		
Address		
Home Phone #	Mobile Phone #	
Have you ever been terminated from employment by an emplo	oyer? Yes No	
Can you work any shift? Yes No		
Can you work overtime, including weekends? Yes No_		
Are you able to perform the essential functions of the job for waccommodation? Yes No	hich you are applying, with or without a reasonable	
DESIRED EMPLOYMENT		
Are you currently employed? Yes No		
Date you can start	Hourly Rate/Salary desired	
Position desired	Full time Part time	
REFERRAL SOURCE		
How did you hear about us?		
Who can we thank for the referral?		
Do you know anyone who works for our company? Yes	No	
f yes, who?		
Relationship to current employee?		
EDUCATION		
High SchoolTrade SchoolCollege Univers	ity	
Do you have any special skills, experience and/or training that would enhance your ability to perform the position applied for? If yes, explain.		

Employment History
Include your last seven (7) years of employment history, including periods of unemployment, starting with the most recent and working backwards in time. Incomplete information could disqualify you from further consideration.

Employer		From		То	
City	Beginnin	ng Position (title)		Ending Pos	ition (title)
	5-6,	ig i dortion (title)			Table (alle)
	( (2)				le 1: p : (p
May we contact? (\	res/No)	Supervisor Na	me		Ending Rate of Pay
Reason for Leaving	5				
	<del></del>		<u> </u>	<u> </u>	
Employer		F			То
City	Reginnin	ng Position (title)		Ending Pos	l ition (title)
City	Degiiiiii	ig rosition (title)		Liturng F 03	ition (title)
		1			1
May we contact? (\	res/No)	Supervisor Na	me		Ending Rate of Pay
Reason for Leaving	Ţ,				
	-	•	-	-	
Employer	ployer		From		То
City	Beginnin	eginning Position (title)		Ending Pos	ition (title)
May we contact? (\	/es /No)	Supervisor Na	Supervisor Name		Ending Rate of Pay
we contact: (	Supervisor Nat		ie		Lifating Nate of Fay
Reason for Leaving	5				
Employer.	-	le le		•	То
Employer	/er		From		То
				_	
City	Beginnin	eginning Position (title)		Ending Position (title)	
May we contact? (\	res/No)	Supervisor Na	Supervisor Name		Ending Rate of Pay
Reason for Leaving	•				
neason for Leaving	<b>)</b>				

#### References

Include the names and contact information of 3 individuals who are NOT prior employers and are NOT family members that we may contact for a reference.

Name	Relationship	Telephone
		( )
Name	Relationship	Telephone
		( )
Name	Relationship	Telephone
		( )

#### Please read carefully before signing.

- I understand that I will have to produce documentation verifying my identity and employment eligibility in the U.S. I understand that I may be required to verify any and all information given on this application.
- I understand that this completed application is the property or Oregon Precision Manufacturing Inc. and/or Lotus Precision Coating, Inc. and will not be returned to me.
- I understand that Oregon Precision Manufacturing Inc. and/or Lotus Precision Coating, Inc. may contact prior employers and other references I have listed.
- I understand that I must notify the Human Resource Department of any changes in my name, address or phone number.
- I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation to be hired. If I am hired, I understand that either the company or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of the Company has the authority to make any assurance to the contrary.

I attest with my signature below that I have given to the Company true and complete information on this application.

No requested information has been concealed. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

Signature	Date
•	

# Oregon Precision Manufacturing, Inc. & Lotus Precision Coating Inc.

13950 SW Galbreath Dr. Sherwood OR 97140

Email: HR@OregonPrecisionMfg.com

phone 503-925-9254

# REQUEST FOR VERIFICATION OF EMPLOYMENT

### SECTION I (Completed by Candidate)

I hereby authorize my prior employer to rele	ase the information inc	dicated below to Oregon Precision Mfg Inc. and			
Lotus Precision Coating, Inc. Additionally, I	release my prior emplo	oyer from all liability whatsoever for issuing the			
requested information.					
Employee Legal Name	Last four diç	Last four digits of Social Security Number			
Signature	Date				
SECTION II (Completed by Previous	s Employer)				
The above individual has applied for a positi application we are requesting your input. Ple					
Employment Period: from:	to				
Last Position Held:					
Ending Wage:					
Eligible for future rehire: Yes	No	Unable to Disclose			
Comments:					
Signature of verifying person:					
Printed Name:					
Title:	Date:	_			

Please return via email <u>HR@OregonPrecisionMfg.com</u> as soon as possible. Feel free to contact us directly via telephone with any questions or concerns. Thank you.