



(503) 864-4422 • PO Box 99, Lafayette, OR 97127

Proyección de Trabajo

Nombre:

Numero de Tel:

Correo electrónico:

1. ¿Estás trabajando actualmente? Sí NO
Si no, ¿por qué dejaste tu último trabajo?

¿Cuántas horas por semana estas disponible para trabajar? ¿Cuál es su compensación de pago ideal?

2. ¿Tienes licencia para manejar vigente, valida de Oregón: Sí NO CDL: Sí NO

3. ¿Has trabajado en un rancho antes? Sí ¿Cuántos años? _____ NO
¿Cuales eran tus tareas diariamente? y ¿qué tipo de equipo/maquinaria operabas?

4. ¿Has tendido la oportunidad de supervisar a otros compañeros de trabajo? Sí NO
Si aplica, ¿le gusto la experiencia? Sí NO

5. ¿Qué tipo de recomendación de ti nos daría su patrón anterior?

6. ¿Qué seguido usas la siguiente tecnología para completar tus tareas laborales más eficientemente:

	Diario	Semanal	Mensual	Nunca
Google Earth:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
El Internet para búsqueda:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mensaje de texto/email:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Microsoft Office:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Otro: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Habla bien el español? Sí NO

Creekside Valley Farms provides equal employment opportunities (EEO) to all employees and applicants for employment without regard to race, color, religion, sex, sexual orientation, national origin, age, disability or genetics. In addition to federal law requirements, Creekside Valley Farms complies with applicable state and local laws governing nondiscrimination in employment in every location in which the company has facilities. This policy applies to all terms and conditions of employment, including recruiting, hiring, placement, promotion, termination, layoff, recall, transfer, leaves of absence, compensation and training. (Updated 2-3-26)

¿Cómo supiste de nosotros?

- Worksource Señal de tráfico
- Capital Press Lugar _____
- Craigslist Indeed
- Referido: _____
- Otro: _____

Interesado en:

- Trabajo de todo el año
 - Tiempo completo Medio tiempo
- Trabajo de temporada de la cosecha
 - Tiempo completo Medio tiempo



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8. Estas cosechando un campo de semillas de hierba festuca de 120 acres. Ya cosecho 20,160 libras de semillas. ¿Cuánto fue su rendimiento por acre?

9. Si tienes un campo de 150 acres, otro de 250 acres y necesitas poner 5 espantapájaros por acre para espantar los gansos, ¿cuántos espantapájaros necesitas?

10. Se le entrega fertilizante que tiene un análisis de 40.4-0-0-5.2. Se le indica que aplique 115 libras de nitrógeno y 15 libras de azufre. Qué tasa por acre del material aplicará?

11. Te dijeron que fueras a rociar Roundup. La tasa de aplicación es de 2 cuartos por acre. Debe incluir Inferno, un adyuvante en aerosol, a razón de 1 cuarto por cada cien galones. Su tanque de aspersion es un tanque de 600 galones y usted aplica la solución mezclada a 10 galones por acre.

a. ¿Cuántos acres podrá cubrir con un tanque lleno de 600 galones aplicando 10 galones por acre?

b. ¿Cuánto Roundup e Inferno pondrás en el tanque de aspersion para hacer la mezcla adecuada?



Aplicación de Empleo

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Nombre: _____

Dirección de casa: _____

Número de teléfono: _____ Correo electrónico: _____

Eres ciudadano de los Estados Unidos? Sí No Si no, ¿está autorizado a trabajar en los EE. UU.? Sí No ¿Es

usted un veterano militar? Sí No

Fecha de alta: _____

Educación

	NOMBRE	UBICACIÓN	MARCAS	ACASO TÚ ¿GRADUADO?
Escuela secundaria:				
Colegio:				

Historial de trabajo

FECHAS	EMPLEADOR/EMPRESA	PROFESIÓN / CARGO	MOTIVO DE SALIR

Referencias

	NOMBRE	COMPAÑÍA	RELACIÓN	TELÉFONO
Profesional:				
Personal:				

Firma: _____ Fecha: _____

Under penalties of perjury 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.

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Pre-Screening Notice and Certification Request for the Work Opportunity Credit

OMB No. 1545-1500

► Information about Form 8850 and its separate instructions is at www.irs.gov/form8850.

Job applicant: Fill in the lines below and check any boxes that apply. Complete only this side.

Your name _____

Street address where you live _____

City or town, state, and ZIP code _____

County _____ Telephone number _____

If you are under age 40, enter your date of birth (month, day, year) _____

- 1 Check here if you received a conditional certification from the state workforce agency (SWA) or a participating local agency for the work opportunity credit.

- 2 Check here if **any** of the following statements apply to you.
 - I am a member of a family that has received assistance from Temporary Assistance for Needy Families (TANF) for any 9 months during the past 18 months.
 - I am a veteran and a member of a family that received Supplemental Nutrition Assistance Program (SNAP) benefits (food stamps) for at least a 3-month period during the past 15 months.
 - I was referred here by a rehabilitation agency approved by the state, an employment network under the Ticket to Work program, or the Department of Veterans Affairs.
 - I am at least age 18 but **not** age 40 or older and I am a member of a family that:
 - a. Received SNAP benefits (food stamps) for the past 6 months; **or**
 - b. Received SNAP benefits (food stamps) for at least 3 of the past 5 months, **but** is no longer eligible to receive them.
 - During the past year, I was convicted of a felony or released from prison for a felony.
 - I received supplemental security income (SSI) benefits for any month ending during the past 60 days.
 - I am a veteran and I was unemployed for a period or periods totaling at least 4 weeks but less than 6 months during the past year.

- 3 Check here if you are a veteran and you were unemployed for a period or periods totaling at least 6 months during the past year.

- 4 Check here if you are a veteran entitled to compensation for a service-connected disability and you were discharged or released from active duty in the U.S. Armed Forces during the past year.

- 5 Check here if you are a veteran entitled to compensation for a service-connected disability and you were unemployed for a period or periods totaling at least 6 months during the past year.

- 6 Check here if you are a member of a family that:
 - Received TANF payments for at least the past 18 months; **or**
 - Received TANF payments for any 18 months beginning after August 5, 1997, **and** the earliest 18-month period beginning after August 5, 1997, ended during the past 2 years; **or**
 - Stopped being eligible for TANF payments during the past 2 years because federal or state law limited the maximum time those payments could be made.

- 7 Check here if you are in a period of unemployment that is at least 27 consecutive weeks and for all or part of that period you received unemployment compensation.

Signature—All Applicants Must Sign

Under penalties of perjury, I declare that I gave the above information to the employer on or before the day I was offered a job, and it is, to the best of my knowledge, true, correct, and complete.

Job applicant's signature ► _____

Date _____