

Employment Screening

How did you hear about us?

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

Name						□ Road Sign	
Name:			☐ Capital Press Location				
Phone number:					☐ Craigslist ☐ Indeed:		
Thone number.			□ Referral: □ other:				
Email address:				Interested in:			
				Year round employment			
					☐ Full tir	me □ Part-Time	
Are you currently employed? Y	ES 🗆	NO 🗆		Sea	asonal harv	vest employment	
If no, why did you leave previou	☐ Full time ☐ Part-Time						
How many hours per week are	you a	vailable to	work? WI	nat is your	desired c	compensation rate?	
2. Do you have a current, valid Oregon	drive	er license:	YES 🗆 NO	CDL:	YES 🗆 NC		
3. Have you worked on a farm before? What were your daily duties an			=				
4. Have you had opportunities to overs		•	yees? S□ NO□	YES 🗆	NO 🗆		
5. How would your previous employers	s desc	cribe you a	s an emplo	oyee?			
6. How often do you use the following	techi Daily		complete j Monthly		more effic	ciently?	
Google Earth:							
Internet for Research:							
Text messaging/email:							
Microsoft office:							
Other:							
7. Are you fluent in Spanish? Y	ES 🗆	NO 🗆					



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Skills Evaluation

- 8. You are harvesting a 120-acre field of perennial fescue grass seed. You harvested 20,160 pounds of seed. What was your yield per acre?
- 9. If you have a 10 acre field, a 150 acre field and a 250 acre field, and need to put 5 scarecrows per acre to scare geese, how many total scarecrows would you need?
- 10. You are given fertilizer that has an analysis of 40.4-0-0-5.2. You are told to apply 115 pounds of nitrogen and 15 pounds of sulfur. What rate per acre of the material will you be applying?
- 11. You were told to go spray Roundup. The Application rate is 2 quarts per acre. You are to include Inferno, a spray adjuvant, at the rate of 1 quart per hundred gallons. Your spray tank is a 600 gallon tank and you apply the mixed solution at 10 gallons per acre.
 - a. How many acres will you be able to cover with a full, 600 gallon tank while applying 10 gallons per acre?
 - b. How much Roundup and Inferno will you put into the spray tank to make the proper mixture?



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Employment Application

Name:	ne: Social Security Number:						
Address:				_			
	umber(s):						
-	en of the United States? □ Yes ary Veteran? □ Yes □ No	-	authorized to work in the				
Education							
	NAME	LOCATION	GPA	DID YOU GRADUATE?			
High School:	IVAME	LOCATION	UIA	GRADUATE.			
College:							
Work History							
DATES	EMPLOYER/COMPANY	JOB TITLE	POSITION	REASON FOR LEAVING			
References							
Г	NAME	COMPANY	RELATIONSHIP	PHONE			
Professional:							
Personal:							
L Signature:			Date:				

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.

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.

Form **8850** (Rev. March 2016)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-1500

Job applicant: Fill in the lines below and check any boxes that apply. Complete only this side.
Your name Social security number ▶
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)
Check here if you received a conditional certification from the state workforce agency (SWA) or a participating local agency for the work opportunity credit.
 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.
 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
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.

Date

Job applicant's signature ▶