



Crain Walnut Shelling, Inc.

EMPLOYMENT APPLICATION AN EQUAL OPPORTUNITY EMPLOYER

CWS Date Stamp

Crain Walnut Shelling (CWS) is an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, religion, sex, national origin, the presence of mental, physical, or sensory disability, sexual orientation, genetic information, or age or any other basis prohibited by federal, state or local law. **PLEASE PRINT LEGIBLY OR TYPE:** Complete all sections that apply to the position you are applying for. Applications will be rejected if sections are not completed in accordance with the instructions.

1. Date of Application:		2. E-mail Address:			
3. Name: <i>exactly as it appears on your ID or right to work documents</i>		First	Middle	Last	Position applying for:
4. Do you have a Driver's License? <i>(Complete the driver's license section only if relates to the position for which you are applying.)</i>		Yes <input type="checkbox"/>	No <input type="checkbox"/>	State:	Number:
5. Address:		Expiration Date:		Class:	
City:		State:		Zip Code:	
6. Home Phone:		Alternate Phone:		7. Desired Starting Wage?	

GENERAL INFORMATION

8. Is this your first job? Yes <input type="checkbox"/> No <input type="checkbox"/>		9. Date available to start work:						
10. If applying for part time, how many hours can you work?		<input type="checkbox"/> Less than 20	<input type="checkbox"/> 20 – 30 hours	<input type="checkbox"/> 31 – 40 hours				
11. What type of work are you looking for at Crain Walnut Shelling, Inc.?		<input type="checkbox"/> Grading	<input type="checkbox"/> Production	<input type="checkbox"/> Sanitation	<input type="checkbox"/> Fumigation	<input type="checkbox"/> QC	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Clerical
		<input type="checkbox"/> Packing	<input type="checkbox"/> Forklift	<input type="checkbox"/> Shipping	<input type="checkbox"/> General Labor	<input type="checkbox"/> Engineering	<input type="checkbox"/> Receiving	<input type="checkbox"/> Any
12. Available to work:		<input type="checkbox"/> Year Round	<input type="checkbox"/> Part Time	<input type="checkbox"/> Temporary / As Needed				
13. Shift Desired:		<input type="checkbox"/> Day	<input type="checkbox"/> Night	<input type="checkbox"/> Swing	<input type="checkbox"/> Any/All shifts			
14. Are you at least 18 years of age or older?				<input type="checkbox"/> Yes	<input type="checkbox"/> No			
15. In accordance with Federal requirement, can you provide proof of your right to work in the U.S. or legal employment authorization within 72 hours of employment?				<input type="checkbox"/> Yes	<input type="checkbox"/> No			
16. Will you now or in the future require Crain Walnut Shelling, Inc. to commence ("sponsor") an immigration case in order to employ you (for example, H-2A, H-1B or other employment-based immigration case)? <i>This is sometimes called "sponsorship" for an employment-based visa status.</i>				<input type="checkbox"/> Yes	<input type="checkbox"/> No			
17. Have you ever applied for a position with CWS, Crain Orchards, Inc. or Eco-Shell, Inc. or worked for any of these companies before?				<input type="checkbox"/> Yes	<input type="checkbox"/> No			
If yes, specify dates:		From:		To:				

EDUCATION, TRAINING & PROFESSIONAL

(Complete Education and Training Section only if it relates to the position for which you are applying)

18. Are you currently in school or training? <input type="checkbox"/> Yes <input type="checkbox"/> No		19. What are you studying? _____			
20. What is your schedule?		23. Did not graduate from High School			
<input type="checkbox"/> 21. Graduated from High School	Name of High School or GED site: _____		<input type="checkbox"/> 23. Did not graduate from High School		
<input type="checkbox"/> 22. Did not graduate but passed GED	Location: _____				
	Name and Address of School	Major Subject	No. of Years Attended	Did you graduate?	Total Units / Degree received
			From To	<input type="checkbox"/> Yes <input type="checkbox"/> No	
College				<input type="checkbox"/> Yes <input type="checkbox"/> No	
University				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other <i>(Specify)</i>				<input type="checkbox"/> Yes <input type="checkbox"/> No	
24. Please list any job-related experience you have with computers, computer programs; (You may omit those which indicate race, color, religion, national origin, ancestry, sex or age):					

LANGUAGE(S)

(Complete Languages Section only if it relates to the position for which you are applying)

30. Please indicate other languages spoken or written other than English.	Language: _____	Written: <input type="checkbox"/> Fluent <input type="checkbox"/> Good <input type="checkbox"/> Fair
	_____	Written: <input type="checkbox"/> Fluent <input type="checkbox"/> Good <input type="checkbox"/> Fair

31. Are there individuals related to you by blood or marriage who are currently employed by CWS?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, state name and relationship?				
32. Where you referred by a CWS employee? If so, please provide their name below.			<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, state name and relationship?				
33. Are you currently employed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	34. If yes, may we contact your current employer?	
			<input type="checkbox"/> Yes	<input type="checkbox"/> No

E M P L O Y M E N T H I S T O R Y

35. A. A separate resume is not acceptable in place of completing the following. B. Show each employer and past work experience for the last 10 years. C. Please list your present or most recent job first. D. Include military activities and training. E. Please include, identify and explain all periods of unemployment in excess of one month during the same 10 years.

Name of Employer		From		To	
		Month	Year	Month	Year
Address		Telephone		Supervisor	
Description of Duties:					
Reason for leaving:					
Name of Employer		From		To	
		Month	Year	Month	Year
Address		Telephone		Supervisor	
Description of Duties:					
Reason for leaving:					
Name of Employer		From		To	
		Month	Year	Month	Year
Address		Telephone		Supervisor	
Description of Duties:					
Reason for leaving:					
Name of Employer		From		To	
		Month	Year	Month	Year
Address		Telephone		Supervisor	
Description of Duties:					
Reason for leaving:					

If you need additional space, please continue your response on a separate page and attach it to this application.

APPLICATION STATEMENT

(Please read the following carefully before signing.)

With my signature, I am stating that I understand and agree that any false, misleading, or incomplete information given in my application, interview(s), or other pre-employment questionnaire and/or procedure, regardless of when discovered by Crain Walnut Shelling, Inc, hereby referred to as the Company, and/or any of its agents, employees, or representatives, will be sufficient basis for my disqualification for employment or, if already employed by the Company, the termination of my employment with the Company.

If an offer of employment is extended to you it is strictly contingent upon satisfactory completion of a pre-employment physical exam with drug screening, a criminal background check and an employment and personal reference check. I also understand that any and all offers of employment are conditioned on the provision of satisfactory proof of an applicant's identity and the applicant's legal authority to work in the United States. Factors used to determine whether an applicant with a conviction is eligible for hire include, but are not limited to, the nature of conviction, length of time that has passed since the conviction, circumstances surrounding the crime, applicability of the conviction to the position applied for, references, and disclosure of the conviction on the employment application.

I hereby certify that the information contained in this application form is true and correct to the best of my knowledge and agree to have any of the statements checked by the Company, unless I have indicated to the contrary. I authorize the references listed, as well as all other individuals whom the Company may contact, to provide Crain Walnut Shelling, Inc and any of its agents, employees, or representatives any and all information concerning my previous employment and any other pertinent information that they may have.

I agree that the Company shall not be liable in any respect if I am not hired or if my employment is terminated as a result of providing such false, misleading, or incomplete information. Further, I release all parties and persons from any and all liability for any damages that may result from furnishing such information to Crain Walnut Shelling, Inc. as well as from the use or disclosure of such information by Crain Walnut Shelling, Inc. or any of its agents, employees, or representatives.

I further acknowledge that my employment and compensation can be terminated "At-Will", with or without cause, and with or without notice, at any time, either at my option or at the option of Crain Walnut Shelling, Inc.. By applying for this position, you further understand that your employment with Crain Walnut Shelling, Inc. will be on an "At-Will" basis, and that neither you nor the Company has entered into a contract regarding the terms or the duration of your employment. As an "At-Will" employee, you will be free to terminate your employment with the Company at any time, with or without cause or advance notice. Likewise, the Company will have the right to reassign you, to change your compensation, or to terminate your employment at any time, with or without cause or advance notice. I understand that no employee or representative of Crain Walnut Shelling, Inc., other than its President, has the authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing. Further, the President of Crain Walnut Shelling, Inc. may not alter the "At Will" nature of the employment relationship unless he does so specifically in writing.

By signing below you signify that you have read the job posting and you understand, are able and willing to perform the functions and duties of that position. In consideration of my employment, I agree to conform to the rules and standards of Crain Walnut Shelling, Inc., as amended by Crain Walnut Shelling, Inc. from time to time at its discretion.

Signature of Applicant

Date

FOR HR USE ONLY

Referral Source:

Walk In Customer Website Internet Posting – Which social media site? FB Website ZipRecruiter Other
 Campus Job Fair Employee Referral – Current CWS employee NAME & ID? :
Add employee to Bonus Spreadsheet? Yes No

Called / In-Person Date: _____

Negotiated Wage: \$ _____

App Rejection Date: _____

Application Screener: _____

Notice Mailed: _____

Position Interviewed for: _____

Interview conducted by: _____

Tentative Start Date: _____

Benefits? Y - N Start Date: _____

Alert set

Primary Language: English / Spanish / Bilerate

Call Back Date: _____

Kronos:

Cost Center: SANI - SORT- PACM - CRAK -LASR – QAFS- SHOP- GROW- RGWH Phase: _____

NI Group: _____

Interview Date: _____

Time: _____

EIS/Temp Input Date: _____ Clear Date: _____

COMP Appt Date: _____

Time: _____

COMP Clear Date: _____ Pass Fail Date: _____

Orientation Date: _____

Time: _____

Supervisor: _____ Dept: _____

Added to Hiring Log:

Stored in Personnel File: Yes No

Disposal Date: _____

Notes: