

Shasta-Sustainable Resource Management



Employment Application. An Equal Opportunity Employer.

Sustainable Resource Management is committed to promoting the safety and health of its employees.

All applicants who are being considered for employment will be required to submit to a pre-employment urinalysis exam.

Sustainable Resource Management has zero tolerance and is a drug and alcohol free work environment.

Position applying for:					
Personal Information					
Last Name:		First Name:		Middle Name:	
Primary Phone:		Secondary Phone:		Email:	
Mailing Address:		City:		State:	Zip:
What days and hours are you available for work?					
Available for any shift?		Yes:	No:	Available to work weekends?	
				Yes:	No:
Are you over 18 years of age? <small>Employment consideration is subject to verification that you are of minimum legal age.</small>					No:
Have you worked for Sustainable Resource Management before?		Yes:	No:	Dates:	
Are you related to anyone employed by Sustainable Resource Management?					No:
Name and Relation:					

Education					
High School :		Location of High School:			
Graduated:	Yes:	No:	GED:	Yes:	No:
College or University:		Course of study:		Degree or Certificate:	
Business or Trade School:		Course of study:		Certificate or License :	
Special Skills, Professional Licenses, Certificates:		Issued by:		Expiration Date:	

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Work/Employment History

List below all full-time and part -time employment, listing each job separately. Start with your most current employer. Account for all periods of employment. You must complete this section, do not write, see attached.

Current or Most Recent Employer: _____ **May we contact this employer? Y or N** _____

Name:		Address:	
Employment Dates:	From:	To:	Job Title:
Hours per week:	Supervisor Name:		Phone # :
Duties Preformed: _____			
Reason for Leaving: _____			

Previous Employment: _____ **May we contact this employer? Y or N** _____

Name:		Address:	
Employment Dates:	From:	To:	Job Title:
Hours per week:	Supervisor Name:		Phone # :
Duties Preformed: _____			
Reason for Leaving: _____			

Previous Employment: _____ **May we contact this employer? Y or N** _____

Name:		Address:	
Employment Dates:	From:	To:	Job Title:
Hours per week:	Supervisor Name:		Phone # :
Duties Preformed: _____			
Reason for Leaving: _____			

Previous Employment: _____ **May we contact this employer? Y or N** _____

Name:		Address:	
Employment Dates:	From:	To:	Job Title:
Hours per week:	Supervisor Name:		Phone # :
Duties Preformed: _____			
Reason for Leaving: _____			

Previous Employment: _____ **May we contact this employer? Y or N** _____

Name:		Address:	
Employment Dates:	From:	To:	Job Title:
Hours per week:	Supervisor Name:		Phone # :
Duties Preformed: _____			
Reason for Leaving: _____			

I hereby certify that all statements made in this application are true and I agree and understand that any misstatement or omission of material fact(s) will cause forfeiture on my part of all rights of employment with Sustainable Resource Management. I authorize investigation of all matters contained in this application. If offered a position, I further agree to submit to a complete medical examination and drug screen by a physician designated by the company as a condition of employment. I must conform to the company's rules and regulations and understand that if offered employment, it is "at will" thus the company retains the right to end employment at any time.

Signature: _____ **Date:** _____



Shasta-Sustainable Resource Management, Inc.
20811 Industry Rd.
Anderson, CA 96007
(530) 339-7600

Employee Race/Ethnicity Questionnaire

All new/hired employees are requested to voluntarily self-identify their race/ethnicity and gender in order to monitor and evaluate the provision of equal employment Opportunity and non-discriminatory employment practices. Complete the form promptly and return it to Human Resources.

NOTE: If you choose not to identify, the department is required to visually identify under federal law.

Employee Name: _____

Gender : Male _____ Female _____

Date of Hire: _____

Race and Ethnicity

Please check one box that best describes your race or ethnicity.

- | | |
|---|--|
| <input type="checkbox"/> Black or African American | <input type="checkbox"/> White or Caucasian |
| <input type="checkbox"/> Asian | <input type="checkbox"/> Multiple Races (Non-Hispanic or Latino) |
| <input type="checkbox"/> American Indian or Alaska Native | <input type="checkbox"/> Pacific Islander |
| <input type="checkbox"/> Hispanic or Latino | |
| <input type="checkbox"/> I choose not to identify. I understand that I must be visually identified under Federal law. | |

1. If you identify with more than one race that is non-Hispanic or Latino, select Multiple Races.
2. If you identify with more than one Asian ethnicity, select Multiple Asian.
3. If you identify with more than one Pacific Islander ethnicity, select Multiple Pacific Islander.

Employee Signature: _____ Date: _____

Privacy Notice on Information Collection

Sustainable Resource Management is committed to maintaining the privacy of your personal information. All information we collect is governed by the State of California Information Practices Act of 1977 (Civ. Code, 1798-



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1798.78) Government Code section 11015.5, Government Code section 11019.9 and the California Public Records Act (Gov. Code 6250-6270.5)

Legal authority for collection and use of information

Sustainable Resource Management is requesting the information specified on this form pursuant to Government Code Section 19704, subdivision (b).

The information collected will be used for statistical analysis as required under Government Code sections 19792 subdivisions (h) and (i). In addition, under Public Law 88-352, Title VII of the Civil Rights Act of 1964, all state and local governments are required to maintain records and submit a report to the Equal Opportunity Commission. This information is required to comply with the Office of Management and Budget's (OMB), Revisions to the Standards for Classification of Federal Data on Race and Ethnicity.

Disclosure and Sharing

The company shall not under any circumstance, sell your personal information. Government Code Section 11015.5, subdivision (a) (6) prohibits the company and all agency from distributing or selling any information.

Information may be shared under the following circumstances:

1. In published statistical reports. No names, social security numbers or other personal identifying information will be provided through these statistical reports.
2. You give us written permission and consent.
3. We may release information to a party with a legal authority, such as a subpoena.

If you elect not to provide the information requested, the company will not be able to effectively evaluate the representation of the workforce.

Department Instructions

If an employee chooses not to identify, visual identification is required by Title 29, Code of Federal Regulations Section 1602.30 to meet Equal Employment Opportunity Commission EEO-4.

Reporting requirements. Department may confidentially destroy this form after it is keyed.