

RETURN COMPLETED APPLICATION TO:

220 2nd St NE, East Wenatchee, WA
MAIL: P.O. Box 1986, Wenatchee, WA 98807
FAX: 509-888-7190

EMAIL: cherrycrew@northernfruit.com If you have any questions, please call us at: 509-884-6651



		Р	ERSONAL I	NFORMATION				
Name:								
Firs	St	Middle		Last				
Street Address:				City		State	Zip	
Phone:								
Cell Home		Home		Email:				
Date of Birth:	1	Paren	t <u>(s) work at North</u>	ern Fruit or Ice Lakes?	☐ Yes ☐	_No		
Worked with us before? Yes No			Year(s):			Position Held:		
Current Student? Yes No		High S	High School or College name:		Approx GPA:			
Emergency Contact:			Emergency Phone #					
				NT HISTORY				
				NI IIISTONI				
Employer:			City	D-4	18/			
			City	Dati	es Worked	Pos	sition	
References:	Name		Company		Phor	Δ		
	Namo				THO			
			PREFER	ENCES				
Preferred Shift:	☐ Early Shift (appr	0X.7AM - 3:30 PM)	☐ Late Shift	(approx.4PM-12AM)	☐ Either			
Preferred Position(s):	Any Position	Sorting	Clean Up					
	Box Filling	Forklift	Truck Driver					
Additional Comments:								
ė.								
authorize investigation	of all statements in this	application. I unders	stand misreprese	ntation or omission of fac	ts is cause for disr	nissal. I under	stand and agree	
hat my employment is satisfying the requirem	for no definite period ents of the U.S. Departi	I and may be terr ment of Justice Form	ninated at any I-9.	time without previous n	otice. Any employ	ment is contir	igent upon	
Date			Signature					
	THANK	YOU FOR YOL	JR INTERES	T IN JOINING THE	NORTHERN	FRUIT TE	AM!	
		For No	orthern's Office	Staff Use Only				
nterviewed by:								
comments:								