Alta Employment Application Cover Sheet

Equal Employment Opportunity Statement
Alta Forest Products, LCC is committed to providing an equal opportunity for all individuals who are seeking employment. The objective of Alta Forest Products, LLC.'s hiring procedure is to select the most qualified individual for the job. We encourage you to provide us with complete and accurate information that demonstrates your qualifications to perform the duties of the job you are applying for.

Invitation to request reasonable accommodation for applicants with a disability
Any applicant with a disability who needs reasonable accommodation in any step of the hiring process may request assistance to demonstrate his or her qualifications to perform the duties of the job for which the applicant is applying. The applicant who needs reasonable accommodation for a disability should inform Brian Wamsley, Human Resources, at 318 Morton Rd., 360-219-0008 extension 3510.

Responding to inquiries on the application form
You must complete all inquiries on the application accurately and truthfully. If you leave an inquiry blank, we will reject your application. If you believe the question or information sought is not applicable, put N/A for a response in the space provided. If you report false or inaccurate information, we will reject your application or terminate your employment if we discover the false or inaccurate information after the date of hire.

Please return completed application to:

Alta Forest Products, Inc.
Attention: Brian Wamsley
P.O. Box 1328
Morton, WA 98356

Fax: 360-496-5252

Email: brianwamsley@altafp.com

Alta Employment Application Acknowledgment Form

APPLICANT NAME _____

Purpose of the application form
I understand that the purpose of the application form is to give me the opportunity to provide the company with information about my skills, experience, abilities and other personal attributes that meet the qualification requirements for the job position that is available. I understand that it is in my best interest to be thorough, accurate and descriptive in providing this information. I also understand that a number of people will apply for the job opening and that Alta Forest Products, LLC does not guarantee anyone an interview or consideration beyond the application form.

Consideration of the application form
I understand that Alta Forest Products, LLC will consider my application for the job opening that I have applied for and for no other job position. I also understand that Alta Forest Products, Inc. will only consider my application active for 90 calendar days from the date of my application. I understand that if I want Alta Forest Products, LLC to consider me for a longer period of time or for other job positions then I must complete and file a new application when there is a position posted.

Reference and information check
In submitting this application for employment I understand that Alta Forest Products, LLC. will investigate the information that I provide. If Alta Forest Products, LLC selects me for an interview I understand that Alta Forest Products, LLC, will require me to provide Alta Forest Products, Inc. with a release and waiver form so that Alta Forest Products, LLC may contact a representative of each former employer, educational institution and personal reference that I list on the application or provide in an interview.

Drug and alcohol test
I understand that part of the application process at Alta Forest Products, LLC includes a urinalysis exam which detects the use of illegal drugs and alcohol. I understand that if my test results are positive, then Alta Forest Products, LLC will not consider me for employment at that time. I understand that after 90 days from testing positive, I may reapply.

I-9 form documentation
I understand that if Alta Forest Products, LLC offers me a job position then before I commence work I must complete an I-9 form and provide Alta Forest Products, LLC with documentation that shows that I am authorized to work in the United States. I understand that if I do not provide this documentation I will no longer be qualified for the job position. I understand that I may obtain information about the documentation by contacting Brian Wamsley at 318 Morton Rd., 360-219-0008 or by contacting the United States Immigration and Naturalization Service whose address and phone number may be found in the phone directory.

General Acknowledgment
I have read and understand all of the instructions and acknowledgments set forth above. My signature represents that I will comply and that I understand the consequences if I do not comply.

_____ _____

Applicant's Signature Date

EMPLOYMENT APPLICATION
Alta Forest Products LLC.
An Equal Employment Opportunity Employer

NAME AND ADDRESS	
Name (First Mi, Last)	**Social Security #**
Mailing Address	
City, State, and Zip Code	
Telephone	**Alternate Phone**
E-mail	**If under 18 Please list Age**

Job Applied For: _____ Today's Date: _____

Are you seeking: Full Time _____ Part Time _____ Temporary _____ Summer Employment _____

EDUCATION OR TRAINING — Please indicate your education and/or training background which is relevant to the job you are applying for:

_____

SPECIAL SKILLS: — Please indicate if you have any skills or experience operating or maintaining plant equipment or machines. If you have any special license, please provide details of your License.

"I agree, upon request, to submit to a blood or urine test to detect drug usage and recognize that said test will be used to determine suitability for initial or continuing employment."

_____

Signature

Have you ever worked for this company before? _____ yes _____ no

If yes, when? _____

TODAY'S DATE _____

WORK EXPERIENCE		
Please list ALL work experience beginning with your most recent job held. Attach additional sheets if necessary.		
Company	**Name of last supervisor**	**Hrs/week**
Address	**Start Date**	**Starting Salary**
City, State and Zip Code	**End Date**	**Final Salary**
Reason for Leaving (be specific)		
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.		
May we contact this employer? ␣ **Yes** ␣ **No**		

Company	**Name of last supervisor**	**Hrs/week**
Address	**Start Date**	**Starting Salary**
City, State and Zip Code	**End Date**	**Final Salary**
Reason for Leaving (be specific)		
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.		
May we contact this employer? ␣ **Yes** ␣ **No**		

Company	**Name of last supervisor**	**Hrs/week**
Address	**Start Date**	**Starting Salary**
City, State and Zip Code	**End Date**	**Final Salary**
Reason for Leaving (be specific)		
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.		
May we contact this employer? ␣ **Yes** ␣ **No**		

CERTIFICATION:

My signature below certifies that all information in this application is correct and complete to the best of my knowledge and belief and that I understand that intentionally false information could result in refusal of employment. I authorize present and former employers, and individuals I have listed as references, to furnish information about my employment record, including a statement of the reason for the termination of my employment, work performance, abilities, and other qualities pertinent to my qualifications for employment, hereby releasing them from any and all liability for damages arising from furnishing the requested information

____ ____________________________

Signature Date