



971-273-7941 Events@ApogeeEvents.net
1210 Hawthorne Ave NE
Salem, OR 97301

We are an Equal Opportunity Employer and fully subscribe to the principles of Equal Employment Opportunity. Applicants and/or employees are considered for hire, promotion and job status, without regard to race, color, religion, creed, sex, marital status, national origin, age, physical or mental disability.

Name _____
FIRST MIDDLE LAST

Address _____ City _____ State _____

Zip _____ Telephone _____ Position Applying _____

GENERAL INFORMATION:

Are you able to perform the essential job functions of the position for which you are applying with or without reasonable accommodation?

Yes No

EDUCATION & TRAINING:

Circle last grade completed - 1 2 3 4 5 6 7 8 9 10 11 12 College 1 2 3 4 Masters _____ Doctorate _____

Name & Address of School

Major

Graduated

Average

Course studied or degree (Y or N) Grade

Last High School Attended/Address: College or University/Address

College or University/Address Other School (Technical, Vocational, Graduate, etc.) Address List any scholarships, academic honors, awards or special achievements:

POSITION APPLYING FOR

Desired Pay: _____ **Date you can start** _____

Please list skills that you believe are valuable in your employment:

Do you have any previous experience relating to this position? If so what and where?

Why do you want to work for Apogee Events?

ARE YOU WILLING TO WORK NIGHTS, WEEKENDS, AND HOLIDAYS?

YES

NO

EMPLOYMENT HISTORY

Starting with your PRESENT or MOST RECENT EMPLOYER list in consecutive order ALL EMPLOYMENT for at least the past **THREE** employers. If currently employed, may we contact your employer? Yes No

PRESENT OR MOST RECENT EMPLOYER

Business Name

Address

Phone

Dates Employed

NAME & TITLE OF SUPERVISOR TITLE OF YOUR POSITION:

LIST JOBS HELD, DUTIES PERFORMED, SKILLS USED, & PROMOTIONS WHILE EMPLOYED AT THIS COMPANY: _____

REASON FOR LEAVING:

SECOND EMPLOYER

Business Name

Address

Phone

Dates Employed

NAME & TITLE OF SUPERVISOR TITLE OF YOUR POSITION:

LIST JOBS HELD, DUTIES PERFORMED, SKILLS USED, & PROMOTIONS WHILE EMPLOYED AT THIS COMPANY: _____

REASON FOR LEAVING:

THIRD EMPLOYER

Business Name
Address
Phone
Dates Employed

NAME & TITLE OF SUPERVISOR TITLE OF YOUR POSITION:

LIST JOBS HELD, DUTIES PERFORMED, SKILLS USED, & PROMOTIONS WHILE EMPLOYED AT THIS COMPANY: _____

REASON FOR LEAVING:

READ CAREFULLY: I certify that the information contained in this application is correct to the best of my knowledge and understand that any misstatement or omission of information may result in denial of employment or discharge. I authorize the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

Signature _____ Date _____