



Application for Employment

Position Applying For:	Date of Application:
How did you learn about us?	

Last Name:	First, Middle:
Home Phone:	Cell Phone:
Home Address Street:	
City, State:	Zip code:
Email Address:	

<p>Do you have any driving offenses? If yes, please explain below:</p> <p style="text-align: center;">(Must provide a current copy of your DMV record.)</p> <p>Driver's License #:</p>
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Have you ever filed an application with us before?	Yes	No
If yes, give date:		

Are you currently employed?	Yes	No
May we contact your present employer?	Yes	No
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?	Yes	No
Have you ever been convicted of a crime? If yes, explain:	Yes	No
Date available for work (mm/dd/yyyy):	Desired salary:	
Are you available to work Full Time, Part Time, or Temporary? (Circle one.)		
Indicate dates for temporary work:		
Do you have reliable transportation?	Yes	No
Do you have current insurance on your vehicle?	Yes	No
<p>(Must provide a current copy of your automobile insurance coverage.) *NOTE: You are required to carry the minimum automobile insurance required by state law. If you are involved in an automobile accident with your vehicle while on the clock, your personal automobile insurance covers your exposure.</p>		

Do you have any experience with plants and their care? If yes, please explain below:	Yes	No
How many days were you absent from work/school during the past year?		

Education

	Name and Address	Course of Study	Years Completed
High School:			
College:			
Other:			

Work Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities, or other protected status.

Employer:	Dates Employed:	
Address:		Phone:
Job Title:		Supervisor:
Work Performed:		
Reason for Leaving:		
Hourly Rate/Salary (Starting):		Hourly Rate/Salary (Final):
Employer:	Dates Employed:	
Address:		Phone:
Job Title:		Supervisor:
Work Performed:		
Reason for Leaving:		
Hourly Rate/Salary (Starting):		Hourly Rate/Salary (Final):

Employer:	Dates Employed:	
Address:		Phone:
Job Title:		Supervisor:
Work Performed:		
Reason for Leaving:		
Hourly Rate (Starting):		Hourly Rate/Salary (Final):
Employer:	Dates Employed:	
Address:		Phone:
Job Title:		Supervisor:
Work Performed:		
Reason for Leaving:		
Hourly Rate (Starting):		Hourly Rate (Final):

Comments: Include explanation for any gaps in employment.

Describe any specialized training, apprenticeship, or skills.

Describe any hobbies or special interests.

Personal/Professional References: Do not include family members or past supervisors.

Name:	Phone:	Best Time to Call:	Occupation:
1.			
2.			
3.			

Applicant's Statement

<p>I certify that the answers given herein are true and complete.</p> <p>I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.</p> <p>This application for employment shall be considered active for a period of time not to exceed 90 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.</p> <p>In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand that I am required to abide by all rules and regulations of the employer. It is further understood that any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause.</p> <p>GreatScapes & More, Inc. is operated under Department of Agriculture Regulations regarding the use of chemicals and pesticides on the premises.</p>	
Signature:	Date: