



# Employment Application

Date: \_\_\_\_\_

## Personal Data:

Name \_\_\_\_\_ Social Security # \_\_\_\_\_

Present Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_-\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_-\_\_\_\_

Email Address \_\_\_\_\_

Are you legally eligible for employment in the U.S?  US Citizen  Green Card  Other

Do you have a valid Drivers License?  Yes # \_\_\_\_\_  CDL  None

Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_

## Employment Desired:

Position \_\_\_\_\_ Date you can start \_\_\_\_\_

Rate of pay desired \_\_\_\_\_ Are you presently employed? \_\_\_\_\_

If so, may we inquire of your present employer? \_\_\_\_\_

## Education:

Circle Highest School Year Completed (grade) 8 9 10 11 12 College 1 2 3 4

Name of school beyond High School \_\_\_\_\_

Did you graduate? \_\_\_\_ Vocational Training \_\_\_\_\_ Are you a Veteran? \_\_\_\_\_

## Additional Information:

Volunteer Work \_\_\_\_\_

Special skills, licenses, or non-work related experience

\_\_\_\_\_  
\_\_\_\_\_

Referred by: \_\_\_\_\_

## Work Experience

Do you have experience in these areas? (Check all applicable)

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Operate manual transmission vehicles | <input type="checkbox"/> Computer Skills          | <input type="checkbox"/> Sprinkler install |
| <input type="checkbox"/> Horticulture/nursery                 | <input type="checkbox"/> Retail sales/cashier     | <input type="checkbox"/> Truck driving     |
| <input type="checkbox"/> Heavy equipment operating            | <input type="checkbox"/> Farm equipment operating | <input type="checkbox"/> Sales             |

Please list any physical limitations \_\_\_\_\_

List any professional licenses and certifications \_\_\_\_\_

### Present/former employers:

Dates of employment: start \_\_\_\_/\_\_\_\_/\_\_\_\_ end \_\_\_\_/\_\_\_\_/\_\_\_\_

Reason for Leaving \_\_\_\_\_

Company Name \_\_\_\_\_ Address \_\_\_\_\_

Phone # \_\_\_\_\_ Who to Contact \_\_\_\_\_

Job Description \_\_\_\_\_

(duties, skills, equipment used)

Dates of employment: start \_\_\_\_/\_\_\_\_/\_\_\_\_ end \_\_\_\_/\_\_\_\_/\_\_\_\_

Reason for Leaving \_\_\_\_\_

Company Name \_\_\_\_\_ Address \_\_\_\_\_

Phone # \_\_\_\_\_ Who to Contact \_\_\_\_\_

Job Description \_\_\_\_\_

(duties, skills, equipment used)

Dates of employment: start \_\_\_\_/\_\_\_\_/\_\_\_\_ end \_\_\_\_/\_\_\_\_/\_\_\_\_

Reason for Leaving \_\_\_\_\_

Company Name \_\_\_\_\_ Address \_\_\_\_\_

Phone # \_\_\_\_\_ Who to Contact \_\_\_\_\_

Job Description \_\_\_\_\_

(duties, skills, equipment used)

References (names of persons not related to you) that we may call.

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_