

PERSONAL INFORMATION

NAME _____ DATE _____
FIRST MIDDLE LAST

CELL PHONE _____ HOME PHONE _____

CURRENT ADDRESS _____
STREET

CITY STATE ZIP

EMAIL ADDRESS _____ ARE YOU 18 YEARS OR OLDER? YES NO

ARE YOU EITHER A U.S. CITIZEN OR AN ALIEN AUTHORIZED TO WORK IN THE UNITED STATES? YES NO

CAN YOU PASS A COMPANY SPONSORED DRUG & ALCOHOL TEST? YES NO

WHAT CLASS TYPE DRIVERS LICENSE DO YOU CURRENTLY POSSES? A B D OTHER _____

ARE THERE ANY TICKETS ON YOUR DRIVING RECORD? YES NO

IF SO, PLEASE ELABORATE: _____

EMERGENCY CONTACT: _____ PHONE NUMBER: _____

EMPLOYMENT DESIRED

ARE YOU CURRENTLY EMPLOYED? YES NO WHEN CAN YOU START? _____

IF YOU ARE EMPLOYED, MAY WE CONTACT YOUR CURRENT EMPLOYER? YES NO

SALARY DESIRED _____ DO YOU HAVE ANY LAWN CARE EXPERIENCE? YES NO

PLEASE EXPLAIN: _____

DO YOU HAVE A HERBICIDE LICENSE? YES NO

IF YOU SELECTED YES, WHICH HERBICIDE LICENSE? A E J OTHER _____

CAN YOU WORK OVERTIME WHEN ASKED? _____

SELECT THE POSITION(S) YOU ARE APPLYING FOR:

SPRAY APPLICATOR/TECHNICIAN

LAWN CREW MEMBER

LAWN CREW SUPERVISOR

BED MAINTENANCE

LANDSCAPER

EDUCATION				
	NAME & LOCATION OF SCHOOL	NUMBER OF YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
HIGH SCHOOL				
COLLEGE				
TRADE OR VOCATIONAL SCHOOL				

EMPLOYMENT HISTORY					
MONTH/YEAR	NAME & ADDRESS OF EMPLOYER	SUPERVISOR NAME & PHONE NUMBER	INITIAL POSITION & FINAL POSITION	STARTING PAY & ENDING PAY	REASON FOR LEAVING
FROM					
TO					
FROM					
TO					
FROM					
TO					

REFERENCES: GIVE THE NAMES OF THREE PEOPLE NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

1	NAME _____ PHONE NUMBER _____
	ADDRESS _____ STREET CITY STATE ZIP
	BUSINESS _____ YEARS ACQUAINTED _____

2	NAME _____ PHONE NUMBER _____
	ADDRESS _____ STREET CITY STATE ZIP
	BUSINESS _____ YEARS ACQUAINTED _____

3	NAME _____ PHONE NUMBER _____
	ADDRESS _____ STREET CITY STATE ZIP
	BUSINESS _____ YEARS ACQUAINTED _____

Do you have experience in these areas?	Yes	No	Willing to Learn
Lawn Care			
Commercial lawn mowers			
Weed whip and backpack blower			
Plant identification			
Hedge and Shrub Pruning			
Ability to lift 50 pounds			
Landscaping			
Ability to read landscape plans and drawings			
Mulch and rock installation			
Planting of trees, shrubs, perennials and annuals			
Installation of brick patios, walls and other hardscapes			
Install edging and landscape fabric			
Machines & Equipment - Can you operate?			
Skid-steer or utility loader			
Tractor			
Plate packer and brick cutter			
Lawn Aerator			
Chain saw			
Towing and backing a trailer			
Driving a 1 ton light duty dump truck			
Irrigation			
Basic repairs			
Electrical trouble shooting			
Controller use			

PLEASE SUMMARIZE ANY OTHER SKILLS NOT LISTED TO DESCRIBE YOUR QUALIFICATIONS FOR THE POSITION YOU ARE APPLYING FOR.

I CERTIFY THAT MY ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. IF THIS APPLICATION LEADS TO MY EMPLOYMENT, I UNDERSTAND THAT FALSE OR MISLEADING INFORMATION IN MY APPLICATION OR INTERVIEW MAY RESULT IN MY RELEASE.

Signature _____ Date _____