

Employment Application

Applicant Information											
Full Name:								Are y	vou over 1	8?	
Address:	Last		First	t			М.І.				
/ (001000)	Street Address								Apartmen	t/Unit #	
	City						State		ZIP Code		
Phone:					Email:						
Date you ca	n begin work:						Desired V	Vage:	\$		per hr
Position applying for:											
Are you a ci	tizen of the United States?		YES	NO □	lf no,	are you	authorized to	work in t	he U.S.?	YES	NO □
What type o	f position are you seeking?		FT	PT	Seasonal		ck if you have ow removal e			Lawn	Snow
What days/hours are you available to work?											
Do you have	e a valid driver's license?	YES		Do	you hold	a valid N	MA pesticide a	applicator	license?	YES	NO □
Education											
High School	:			Addres							
From:	То:			raduate	YES ∋?□	NO □	Diploma:				
College:				Addres							
From:	То:	Did	you gi	raduate	YES ∋?□		Degree:				
Other:				Addres	s: YES	NO					
From:	To:	Did	you gi	raduate			Degree:				
				Refe	erences	;					
Please list t	wo professional reference	s (not	famil	y or fri	ends).						
Full Name:							Relati	onship:			
Company:								Phone:			
Address:											
Full Name:							Relati	onship:			
Company:								Phone:			
Address:											

Previous Employment				
Company:	Phone	e:		
Address:	Superviso			
Job Title: Starting Salary:	·	Salary: \$		
Responsibilities:				
From: To: Reason for Leavi	ing:			
May we contact your previous supervisor for a reference?				
Company:	Phone	e:		
Address:	Superviso			
Job Title: Starting Salary:		Ending Salary: \$		
Responsibilities:		-		
From: To: Reason for Leavi	ing:			
May we contact your previous supervisor for a reference?				
Company:	Phone	ə:		
Address:	Superviso	r:		
Job Title: Starting Salary:	Ending	Ending Salary: \$		
Responsibilities:				
From: To: Reason for Leavi	ing:			
May we contact your previous supervisor for a reference?				
Special Considerations (Answers will not disqualify y	/ou from con	sideration)		
Are you able to lift from the ground?	Yes:	No:		
Are you able to work outdoors in all seasons?	Yes:	No:		
Are you able to do handwork with a hoe, rake, shovel, broom or other tool?	Yes:	No:		
Are you able to handle gasoline, diesel fuel, chemicals, etc.?	Yes:	No:		
Are you able to spend hours on your feet?	Yes:	No:		
Are you able to lift heavy loads up to 50 pounds?	Yes:	No:		
Are you able to extend your hours to complete a job?	Yes:	No:		
Do you have prior experience operating commercial mowers?	Yes:	No:		
Do you have prior experience installing hardscapes?	Yes:	No:		
Have you ever driven a truck with a trailer attached? If so, describe experience	? Yes:	No:		
Describe other landsceniar eventiones and additional skills very have and test		1		

Describe other landscaping experience and additional skills you have and tools you can operate:

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature:

Date: