

The Horticare Company

Employment Application

Please print and answer all questions

Personal Information

Date _____ Social Security # _____

Name _____
Last First Middle

Present Address _____
Street City State Zip How long?

Previous Address _____
Street City State Zip How long?

Telephone-(Home) _____ (Business) _____

Citizen of U.S.A.? _____ Yes _____ No Date of Birth _____

If no, do you have a work permit? _____ Yes _____ No Type? _____

Expiration Date _____

Drivers License # _____ State in which issued? _____

If related to anyone in our employ, state name and department:

Referred By: _____

Employment Desired

Position _____ Date you can start _____

Salary Desired _____ Have you previously applied with this Co.? _____ Yes _____ No

If yes, Job _____ Location _____ Date(s) _____

Education

Name & Location Years Attended Date Graduated Degree Received

High School _____

College _____

U.S. Military or Naval Service _____ Rank _____

Present Membership in National Guard or Reserves? _____ Yes _____ No

Work History-(Account for last three positions)

Date/month/year Company & Address Position Held Reason for leaving Supervisor

From _____

To _____

From _____

To _____

From _____

To _____

Special Schools or Training

Personal References:(list three persons, not related, whom you've known 1 year)

Name 1. _____ 2. _____ 3. _____

Address _____

Employer _____

Phone _____

Years Known _____

Notify in Case of Emergency

Name _____ Relationship _____

Street _____ Home phone# _____

City,State,Zip _____ Work phone # _____

Please include any other information you think would be helpful to us in considering you for employment, such as additional work experience, articles/books published, activities, accomplishments, etc. You may exclude all information indicative of age, sex, race, religion, color, national origin and handicap.

Agreement -Please read the following statements carefully

I hereby affirm that the information provided on this application is true and complete to the best of my knowledge and agree that falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

I authorize persons, schools, current employer (if applicable) and previous employers and organizations named in this application to provide The Horticare Company with any relevant information that may be required to arrive at an employment decision. I further understand and agree that if I am offered employment with The Horticare Company and if I accept such employment, either party shall be free to terminate the employment relationship at any time, for any reason.

Applicants Signature _____ Date _____