



Hunter Springs

LANDSCAPE COMPANY, INC

"From Design to Installation...We're your complete Landscape Company"

Application for Employment

Name _____

Address _____

Telephone # _____

Social Security # _____

CDL License Yes () No ()

Driver's License No. State _____ No. _____ # of Points _____

Have you ever been convicted of any crime, other than minor traffic violations but including DUI? Yes ___

No ___

Have you been convicted of or pleaded no contest to a felony within the last five years? Yes ___

No ___ If yes, please explain _____

NOTE: BEFORE hiring, we professionally test physical ability to perform our work, as well as DMV, Criminal and Credit background checks. Do you consent to the above? Yes ___ No ___

Are you eligible to work in the United States? Yes ___ No ___

If you are under age 18, do you have an employment/age certificate? Yes ___ No ___

Do you have dependable transportation? Yes ___ No ___

Work History:

Have you ever worked on your own before – no crew – no supervision on work site: Yes ___ No ___

Have you had outdoor employment? Yes ___ No ___ If Yes, what type: _____

Have you ever been responsible (financially) for your day-to-day work? Yes ___ No ___

Do you have past history with simple mechanical repair? Yes ___ No ___

Do you have your own basic tools? Yes ___ No ___

Do you have "Off-Season" employment (Dec. – Feb.) Yes ___ No ___

Have you had any exposure to one-on-one sales? Yes ___ No ___

Position applied for _____

Days/Hours Available

Monday ___ Tuesday ___ Wednesday ___ Thursday ___ Friday ___ Saturday ___ Sunday ___

Hours available: from _____ to _____

What date are you available to start work? _____



Hunter Springs

LANDSCAPE COMPANY, INC

"From Design to Installation...We're your complete Landscape Company"

Education

High School Graduate? Yes ___ No ___ or GED ___

College? Yes ___ No ___ # of Years? ___ Did you graduate? Yes ___ No ___ Major: _____

Please list any licenses, training certifications or awards you received _____

Special Skills and Qualifications

Summarize any special job-related skills and qualifications from employment or other experience.

Employment History

Present or last position

Employer _____ Address _____

Supervisor _____ Phone _____

Email _____ Position title _____

From _____ To _____ Salary _____

Responsibilities _____

Reason for Leaving _____

Do we have permission to contact? Yes ___ No ___

References: Name/Title/Phone

I certify that the information contained in this application is true and complete. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorize the verification of any or all information listed above.

Signature _____ Date _____

NOTE: You may send a copy of your resume along with the completed application form.