



the greenery, inc.®

— EMPLOYEE OWNED —

Mission: To be the pre-eminent provider of landscaper services in the markets we serve.

EMPLOYMENT APPLICATION

NAME: _____ Date: _____

ADDRESS _____ CITY, STATE, ZIP _____

DAYTIME PHONE NUMBER _____ EVENING PHONE NUMBER _____

EMAIL ADDRESS _____

ARE YOU ELIGIBLE TO WORK IN THE U.S.? YES NO

HAVE YOU EVER WORKED FOR THE GREENERY? YES NO LOCATION _____

HOW DID YOU HEAR ABOUT US? AD IN NEWSPAPER AD IN MAGAZINE JOB POSTING _____ RADIO

WALK-IN REFERRED BY EMPLOYEE _____ INTERNET AD CRAIGSLIST OTHER _____

POSITION YOU ARE APPLYING FOR (PLEASE CHECK)

LANDSCAPE MAINTENANCE CONSTRUCTION RETAIL IRRIGATION

CHEMICAL APPLICATION FLORAL MECHANIC ADMINISTRATION OTHER _____

DATE YOU CAN START _____

WAGE EXPECTED _____

DO YOU HAVE RELIABLE TRANSPORTATION TO GET TO WORK? YES NO

DO YOU HAVE A VALID U.S. DRIVERS LICENSE? YES NO

DO YOU HAVE ANY CONDITION THAT MAY PREVENT YOU FROM PERFORMING PHYSICAL DUTIES ON YOUR JOB? IF YES, PLEASE EXPLAIN: _____

LIST ANY HOBBIES OR LEISURE ACTIVITIES _____

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES NO IF YES, PLEASE EXPLAIN: _____

ARE YOU PRESENTLY EMPLOYED? YES NO

MAY WE CONTACT YOUR PRESENT EMPLOYER? YES NO

IF YES, WHOM? _____ PHONE _____

Employment applications remain on file for 60-days, after which time applicant must re-apply.

Equal Opportunity Employer/E-Verify/Drug Test

Revised: 4/15/2016



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EMPLOYMENT HISTORY

LIST YOUR EMPLOYMENT HISTORY STARTING WITH YOUR MOST RECENT JOB AND CONTINUING FOR THE PAST FIVE YEARS.

EMPLOYER	JOB TITLE	DATES	ENDING SALARY	LEFT BECAUSE
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LIST THREE REFERENCES THAT WE MAY CONTACT: (NOT RELATIVES)

NAME	PROFESSION	LOCATION	PHONE
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1.			
2.			
3.			

LIST THREE SKILLS THAT BEST QUALIFY YOU FOR THIS POSITION?

1.	
2.	
3.	

Voluntary Self-Identification

The completion of this section will enable The Greenery Inc. to monitor full compliance with its Affirmative Action Policy. Completion of this section is completely voluntary.

Sex: Male Female

Ethnicity: Hispanic or Latino American Indian or Alaskan Native Asian White

Black or African American Native Hawaiian or Other Pacific Islander Other

I CERTIFY THAT ALL OF THE ABOVE INFORMATION IS TRUE, AND REALIZE THAT IF HIRED; EMPLOYMENT IS AT WILL AND FALSIFIED INFORMATION ON THIS APPLICATION IS GROUNDS FOR MY IMMEDIATE TERMINATION.

NAME (FIRST, LAST) PLEASE PRINT

SIGNATURE

DATE

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For Greenery Use

Date Rec'd:

Interviewed: Y N

Location Preferred:

Rate: A C F