



# APPLICATION FOR EMPLOYMENT

Position(s) Applied For: \_\_\_\_\_

Date of Application: \_\_\_\_\_

How Did You Learn About Us?

**(Please Print)**

<input type="checkbox"/>	Friend	<input type="checkbox"/>	Advertisement
<input type="checkbox"/>	Employment Agency	<input type="checkbox"/>	Relative
		<input type="checkbox"/>	Other

Last Name	First Name	Middle	Maiden Name
Address	City	State	Zip Code
			How Long

Telephone Number(s)	Email Address	Social Security Number
---------------------	---------------	------------------------

Best time to contact you is: \_\_\_\_\_ : \_\_\_\_\_ AM/PM

If you are under 18 yrs of age, can you provide required proof of eligibility to work? YES NO

Have you ever filed an application with us before? If yes, give date \_\_\_\_\_ YES NO

Are you a member of the National Guard or have you ever been in the armed forces? YES NO  
Specialty \_\_\_\_\_

Have you ever been employed with us before? If yes, give date(s) \_\_\_\_\_ YES NO

Do any of your friends or relatives, other than spouse, work here? If yes, state name, relationship and job: \_\_\_\_\_ YES NO

Are you currently employed? YES NO

May we contact your present employer? YES NO

If hired, can you provide proof of U.S. citizenship or proof of your legal right to live & work in this country? (Proof of citizenship or immigration status will be required upon employment.) YES NO

Date available for work \_\_\_\_/\_\_\_\_/\_\_\_\_ What is your desired salary range? \$ \_\_\_\_\_

Are you available to work: Full Time  
Part Time (Please indicate: Mornings Afternoons Evenings Flexible)  
Seasonal (Please indicate dates available: \_\_\_\_/\_\_\_\_ - \_\_\_\_/\_\_\_\_)

Work hours are required on Memorial Day and weekends April thru June. Can you comply? YES NO

Are you available to work other weekends than the ones listed above? YES NO

Are you currently on "lay-off" status and subject to recall? YES NO

Do you have a valid driver's license in good standing? YES NO

Do you have a valid CDL in good standing? YES NO

This job may require you to do some heavy lifting (40# or more), frequent bending & many hours of standing or walking among other things. Can you do this type of work? YES NO

Our employees cannot smoke on the premises during working hrs. Can you comply? YES NO

Can you speak any foreign languages? If so, what are they? \_\_\_\_\_ YES NO

An Equal Opportunity Employer

## EDUCATION

Type of School	Name and Address of School	Course of Study	Years Completed	Diploma or Degree
High School				
Undergraduate College				
Business or Technical School				
Graduate / Professional				
Please describe other training, seminars, coursework, etc. that applies to the job.				

## WORK EXPERIENCE

*This section does not need to be fully completed if a resume containing some of the same information is attached to this application. You should complete only those questions not answered in your resume.*

Start with your present or last job and include explanation of any gaps in employment. Include any job-related military service assignments and volunteer activities. You may exclude organizations that indicate race, color, religion, gender, national origin, disabilities, etc.

Employer	Dates Employed		Work Performed	
	From	To		
Address				
Telephone Number(s)	Hourly Rate/Salary			
	Starting	Final		
Job Title				
Supervisor	May we contact?		Yes	No
Reason for leaving (be specific):				
Employer	Dates Employed		Work Performed	
	From	To		
Address				
Telephone Number(s)	Hourly Rate/Salary			
	Starting	Final		
Job Title				
Supervisor	May we contact?		Yes	No
Reason for leaving (be specific):				

Employer	Dates Employed		Work Performed		
	From	To			
Address					
Telephone Number(s)	Hourly Rate/Salary				
	Starting	Final			
Job Title					
Supervisor	May we contact?			Yes	No
Reason for leaving (be specific):					

**ADDITIONAL INFORMATION**

**SPECIALIZED SKILLS** (*✓ Skills/Equipment Operated*)

Cash Register	Spreadsheet (Excel)	Production / Mobile Machinery (list)	Other (list)
PC/IBM Compatible	Word Processing (Word-Microsoft)	_____	_____
Access – Data Base	Quick Books Accounting	_____	_____
Skid Loader	Tractor	_____	_____

Other Qualifications. (*Summarize special job-related skills and qualifications acquired from employment or other experience.*)


State any additional information you feel may be helpful to us in considering your application.


**NOTE to ALL Applicants:** You must be able to show proof within the first three days of employment, if hired, that you have a social security card or work permit, driver's license, picture Id or U.S. Passport. Employment consideration is subject to satisfactory work and personal reference reports and favorable reports from outside agencies upon verification of information supplied.

Qualified applicants receive equal consideration. No question is asked for the purpose of excluding any applicant due to race, creed, color, sex, national origin, religion, age, handicap, veteran or marital status, etc. that is prohibited by law or regulation. Piala's Nursery & Garden Shop is an equal opportunity employer.

**PERSONAL/PROFESSIONAL REFERENCES** *(Do not include family members ).*

Name	Phone Number	Best time to call.	Occupation
1.			
2.			
3.			

**APPLICANT'S STATEMENT**

I hereby certify that the answers given by me on this application are true and correct without omissions of any kind whatsoever. I authorize credit checks, criminal checks, and the companies or persons identified in this application to give any information regarding my employment, together with any information they may have regarding me, whether or not it is on their records. I hereby release said companies for all liability damages whatsoever for issuing this information. I am aware that any misstatements or omissions of material facts on this application may be cause for immediate dismissal. Piala's Nursery & Garden Shop retains the right of employment at will, is for no definite period and may be terminated without notice.

In applying for employment, I hereby state that I feel well and strong and know no reason why I cannot do the work assigned to me. I also agree to observe all company policies.

**Applicant's  
Signature**

\_\_\_\_\_

**Date**

\_\_\_\_\_

**DO NOT WRITE BELOW; FOR OFFICE USE ONLY.**

**New Hire - Employment Information**

<b>New Hire Paperwork Given</b>	<b>YES</b>	<b>NO</b>
Start Date	_____	_____
Start Time	_____	_____
Hourly Rate	_____	_____
Salary	_____	_____
Position	_____	_____
Department	_____	_____
Uniform Color	_____	_____
Uniform Size	_____	_____
Review?	_____	_____
Driver Check?	YES	NO