

# Employment Application

Date: \_\_\_\_\_

First: \_\_\_\_\_ Last : \_\_\_\_\_

Mailing Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Best Phone # \_\_\_\_\_ Social Security# \_\_\_\_\_

Birth Date \_\_\_\_\_

Driver's License # (If applicable) \_\_\_\_\_ State \_\_\_\_\_ Type \_\_\_\_\_

Emergency Contact Name/Phone: \_\_\_\_\_

Desired Position: \_\_\_\_\_

Are you interested in Full-time or Part-time employment? \_\_\_\_\_

Are you of legal age to work? Y/N \_\_\_ Are you legally eligible for employment in the US? Y/N \_\_\_

When would you be available to start work? \_\_\_\_\_ How many hours are you available? \_\_\_\_\_ Will you work overtime if asked? Y/N \_\_\_\_\_ Are you available to work weekends? Y/N \_\_\_\_\_

What salary do you expect? (per hour) \_\_\_\_\_

## Education and Training:

### High School

Name	Location	Year Graduated	Degree Earned

### College/University

Name	Location	Year Graduated	Degree Earned

### Vocation/Trade School

Name	Location	Year Graduated	Degree Earned

Other training or relevant credentials:

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Job Skills and Qualifications:

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**Employment**

Starting with most recent employer

Company Name \_\_\_\_\_ Address & Phone \_\_\_\_\_

Job title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Dates employed (mm/yy): Start \_\_\_\_\_ Finish \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

Company Name \_\_\_\_\_ Address & Phone \_\_\_\_\_

Job title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Dates employed (mm/yy): Start \_\_\_\_\_ Finish \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

Company Name \_\_\_\_\_ Address & Phone \_\_\_\_\_

Job title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Dates employed (mm/yy): Start \_\_\_\_\_ Finish \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

**Conviction Record**

Do not include any convictions occurring before 16th birthday or minor traffic violations.

Have you ever been convicted, including appeals, by any law enforcement authorities for any violations of any law, regulation or ordinance? Include and court martial, while in the military. Y/N \_\_\_\_\_

If Yes, Please Explain

Offense \_\_\_\_\_ Date \_\_\_\_\_ Town/State \_\_\_\_\_ Final Action \_\_\_\_\_

Offense \_\_\_\_\_ Date \_\_\_\_\_ Town/State \_\_\_\_\_ Final Action \_\_\_\_\_

I understand and agree that the information provided in this application will be relied upon in considering me for employment, and I certify that all information provided is true, complete, and correct to my best knowledge and that I have not knowingly omitted any requested information. I further understand that any false or misleading statements or omissions made by me on this application or other company records may lead to immediate dismissal at any time during my employment.

I hereby authorize Scott's Orchard and Nursery to open an investigation of my previous employment and activities. I agree to cooperate in said investigation and I release Scott's Orchard and Nursery and any person supplying information to Scott's Orchard and Nursery in connection with use of such information.

I voluntarily submit this application and agree with the above statements.

\_\_\_\_\_  
Applicant's Written Signature

\_\_\_\_\_  
Date

**PLEASE RETURN IN PERSON TO SCOTT'S ORCHARD AND NURSERY**