

Springtime

Landscape and Irrigation

APPLICATION FOR EMPLOYMENT (PLEASE PRINT)

Position Applied For:	Date of Application		
How Did You Learn About SPRINGTIME LANDSCAPE & IRRIGATION? <input type="checkbox"/> Advertisement <input type="checkbox"/> Friend <input type="checkbox"/> Inquiry <input type="checkbox"/> Employment Agency <input type="checkbox"/> Relative <input type="checkbox"/> Other _____			
Last Name	First Name	Middle Name	
Address - Street	City	State	Zip
Best time to contact you at home is:		_____ AM	_____ PM
If you are under 18 years of age, can you provide required proof of you eligibility to work?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever filed an application with Springtime Landscape & Irrigation before?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, give date: _____			
Do any of your friends or relatives, other than a spouse, work at Springtime Landscape & Irrigation?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you currently employed?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
May we contact your present employer?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Proof of citizenship or immigration status will be required upon employment.		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Date available for work	____ / ____ / ____	What is your desired salary range?	_____
Are you available to work:			
<input type="checkbox"/> Full Time			
<input type="checkbox"/> Part Time (Indicate - Mornings Afternoon Evenings)			
<input type="checkbox"/> Temporary (Please indicate dates available _____ / _____ to _____ / _____)			
Are you currently on "lay-off" status and subject to recall?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Can you travel if a job requires it?		<input type="checkbox"/> Yes	<input type="checkbox"/> No

SPRINGTIME LANDSCAPE & IRRIGATION IS AN EQUAL OPPORTUNITY EMPLOYER

Name: _____

EDUCATION				
School	Name and Address of School	Course of Study	Years Completed	Diploma / Degree
High School				
Undergraduate College				
Graduate / Professional				
Other (Specify)				
WORK EXPERIENCE				
Start with your present or last job. Include any job related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.				
Employer		Dates Employed From To		Job Duties / Work Performed
Address				
Telephone Number(s)		Hourly Rate / Salary Starting Final		
Starting/Present Job Title				
Supervisor / Title				
Reason for Leaving				May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer		Dates Employed From To		Job Duties / Work Performed
Address				
Telephone Number(s)		Hourly Rate / Salary Starting Final		
Starting/Present Job Title				
Supervisor / Title				
Reason for Leaving				May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer		Dates Employed From To		Job Duties / Work Performed
Address				
Telephone Number(s)		Hourly Rate / Salary Starting Final		
Starting/Present Job Title				
Supervisor / Title				
Reason for Leaving				May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer		Dates Employed From To		Job Duties / Work Performed
Address				
Telephone Number(s)		Hourly Rate / Salary Starting Final		
Starting/Present Job Title				
Supervisor / Title				
Reason for Leaving				May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No

Comments: Include explanation of any gaps in employment.

Specialized Training / Experience. (Include apprenticeships, skills and extra-curricular activities if applicable.)

- | | | |
|--|--|---|
| <input type="checkbox"/> Aeration / Dethatch | <input type="checkbox"/> Plate Compactor | <input type="checkbox"/> Trencher – Walk Behind |
| <input type="checkbox"/> Blowers | <input type="checkbox"/> Power Hedgers | <input type="checkbox"/> Truck with Trailer |
| <input type="checkbox"/> Boom Truck | <input type="checkbox"/> Power Pruners | <input type="checkbox"/> Vibratory Plow |
| <input type="checkbox"/> Chain Saw | <input type="checkbox"/> Riding Mower | <input type="checkbox"/> Weedeaters |
| <input type="checkbox"/> Excavators | <input type="checkbox"/> Skidsters | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Jack Hammers | <input type="checkbox"/> Snow Plow | _____ |
| <input type="checkbox"/> Loader | <input type="checkbox"/> Sod Cutter | _____ |
| <input type="checkbox"/> Mid Mower | <input type="checkbox"/> Trencher - Riding | |

Do you have a valid CDL? Yes No

Areas you have experience in (even if listed in another section):

- | | | | |
|---------------------------------------|---|--|--|
| Irrigation | Construction | Maintenance | Leadership Experience |
| <input type="checkbox"/> Installation | <input type="checkbox"/> Planting | <input type="checkbox"/> Full Landscape | Foreman of Crew |
| <input type="checkbox"/> Repair | <input type="checkbox"/> Sod | <input type="checkbox"/> Specialized Areas | <input type="checkbox"/> 1 – 4 |
| <input type="checkbox"/> Design | <input type="checkbox"/> Hardscapes | | <input type="checkbox"/> 5 – 10 |
| | <input type="checkbox"/> Water Features | | <input type="checkbox"/> 10 – 15 |
| | <input type="checkbox"/> Design | | <input type="checkbox"/> Greater than 15 |

Can you read and understand blueprints? Yes No

Office Skills

- | | |
|---|--|
| <input type="checkbox"/> Computer – including Excel, Access, Word | <input type="checkbox"/> Internet/E-Mail |
| <input type="checkbox"/> Answering Multi-Line Telephones | <input type="checkbox"/> Design Software |
| <input type="checkbox"/> Accounts Payable | <input type="checkbox"/> Accounting Software |
| <input type="checkbox"/> Accounts Receivable | |

Please list any additional qualifications you feel would relate to the job for which you are applying.

PERSONAL / PROFESSIONAL REFERENCES (Do not include family members or past supervisors.)

NAME	PHONE NUMBER	BEST TIME TO CALL	OCCUPATION

Name: _____

APPLICANT'S STATEMENT

I CERTIFY, BY SIGNING THIS PAGE, ANSWERS HEREIN GIVEN ARE TRUE AND COMPLETE.

I AUTHORIZE SPRINGTIME LANDSCAPE & IRRIGATION TO INVESTIGATE ANY AND ALL STATEMENTS CONTAINED IN THIS APPLICATION FOR EMPLOYMENT AS MAY BE NECESSARY IN ARRIVING AT AN EMPLOYMENT DECISION.

I UNDERSTAND THAT THIS APPLICATION FOR EMPLOYMENT SHALL BE CONSIDERED ACTIVE FOR A PERIOD OF TIME NOT TO EXCEED 45 DAYS. ANY APPLICANT WISHING TO BE CONSIDERED FOR EMPLOYMENT BEYOND THIS TIME PERIOD SHOULD INQUIRE AS TO WHETHER OR NOT APPLICATIONS ARE BEING ACCEPTED AT THAT TIME.

I HERBY UNDERSTAND AND ACKNOWLEDGE THAT, UNLESS OTHERWISE DEFINED BY APPLICABLE LAW, ANY EMPLOYMENT RELATIONSHIP WITH SPRINGTIME LANDSCAPE & IRRIGATION IS OF AN "AT WILL" NATURE, WHICH MEANS THAT THE EMPLOYEE MAY RESIGN AT ANY TIME AND THE EMPLOYER MAY DISCHARGE EMPLOYEE AT ANY TIME WITH OR WITHOUT CAUSE. IT IS FURTHER UNDERSTOOD THAT THIS "AT WILL" EMPLOYMENT RELATIONSHIP MAY NOT BE CHANGED BY ANY WRITTEN DOCUMENT OR BY CONDUCT UNLESS SUCH CHANGE IS SPECIFICALLY ACKNOWLEDGED IN WRITING BY AN AUTHORIZED EXECUTIVE OF THIS ORGANIZATION.

IN THE EVENT OF EMPLOYMENT, I UNDERSTAND THAT FALSE OR MISLEADING INFORMATION GIVEN IN MY APPLICATION OR INTERVIEW(S) MAY RESULT IN DISCHARGE. I UNDERSTAND, ALSO, THAT I AM REQUIRED TO ABIDE BY ALL RULES AND REGULATIONS OF SPRINGTIME LANDSCAPE & IRRIGATION.

Applicant Signature

Date