Adair's Landscape& Maintenance Corp.

Employment Application Form

(Please print and complete all sections)

Applicant Information

Name (Last, First) _____

Home Phone: _____ Cell: _____

Email Address: _____

Street Address: _____

City, State, Zip Code: _____

Best way to contact you: ❑ Home Phone ❑ Cell ❑ Email ❑ US mail

Are you Bilingual in Spanish & English? ❑ Yes ❑ No

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

Do you have a valid Utah driver's license? ❑ Yes ❑ No

Employment Positions

Position(s) applying for: _____

How did you hear about this position?

❑ Referral from current employee. _____

❑ Job Board. Please specify: (Indeed, Google.com, etc.) _____

❑ Newspaper, trade magazine, Other Please specify: _____

Days/Hours Available

On rare occasions you may be asked to work weekends, holidays or snow days as needed.

❑ Monday: Hours Available: from _____ to _____

❑ Tuesday: Hours Available: from _____ to _____

❑ Wednesday: Hours Available: from _____ to _____

❑ Thursday: Hours Available: from _____ to _____

❑ Friday: Hours Available: from _____ to _____

Can you work on the weekends? ❑ Yes ❑ No

Can you work evenings? ❑ Yes ❑ No

Are you available to work overtime? ❑ Yes ❑ No

If hired, would you have transportation to/from work? ❑ Yes ❑ No

If hired, on what date can you start working? _____ / _____ / _____ (MM/DD/YYYY)

Salary desired: $ _____ (per annum)

Personal Information:

Do you have any friends, relatives, or acquaintances working for this Company or its related companies? ❑ Yes ❑ No If yes, state name & relationship: _____

Education, Training and Experience

For each level of schooling, please give the school's name, the city and state, your major and minor subjects, the degree, and the year it was received.

High School: _____

College or University: _____

Graduate School: _____

Military Services: _____

Employment

Are you currently employed? ❑ Yes ❑ No

If you are currently employed, may we contact your current employer? ❑ Yes ❑ No

Name of Employer: _____

Name of Supervisor: _____

Telephone Number: _____

Business Type/Industry: _____

Address: _____

City, State, Zip: _____

Length of Employment (Include Dates): _____

Position & Duties: _____

References

Please list three persons who have knowledge of your current/recent work performance. Please describe past employment positions, dating back three years. Please account for all periods of unemployment. If you have a resume, please attach one to this Application. **Even if you have attached a resume this section must be completed.**

Name of Employer: _____

Name of Supervisor: _____

Telephone Number: _____

Business Type/Industry: _____

Address: _____

City, State, Zip: _____

Length of Employment (Include Dates): _____

Position & Duties: _____

Reason for Leaving: _____

May we contact this employer for references? ❑ Yes ❑ No

Name of Employer: _____

Name of Supervisor: _____

Telephone Number: _____

Business Type/Industry: _____

Address: _____

City, State, Zip: _____

Length of Employment (Include Dates): _____

Position & Duties: _____

Reason for Leaving: _____

May we contact this employer for references? ❑ Yes ❑ No

Name of Employer: _____

Name of Supervisor: _____

Telephone Number: _____

Business Type/Industry: _____

Address: _____

City, State, Zip: _____

Length of Employment (Include Dates): _____

Position & Duties: _____

Reason for Leaving: _____

May we contact this employer for references? ❑ Yes ❑ No

We Are an Equal Opportunity Employer

Our Company is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Applicants requiring reasonable accommodation in the application and/or interview process should notify a representative of the Company.

Certification

I certify that I have not knowingly withheld any information that might affect my chances for hiring. I attest to the fact that the answers given by me are true and correct to the best of my knowledge and ability. I understand that any omission (including any misstatement) of material fact on this application or on any document used to secure this employment can be grounds for rejection of my application or, if I am employed by this company, can be terms for my immediate termination from the company. _____ (*Initial*)

I understand that if I am hired, I will be an employee "at-will" and thus my employment can be terminated at any time either with or without prior notice, and by either me or the company. _____ (*Initial*)

I permit the company to check and verify my references, record of employment, education record, and any other information I have provided. Unless otherwise noted, I authorize the references I have listed to disclose any information related to my work record and my professional experiences with them, without giving me prior notice of such disclosure. In addition, I release the company, my former employers & all other persons and entities, from any & all claims, demands or liabilities arising out of or in any way related to such examination or revelation. _____ (*Initial*)

I certify that 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.

Applicant's Signature: _____ **Date:** _____

FOR COMPANY USE ONLY:

Received by: _____ **Date:** _____

Interviewer: _____ **Date:** _____