

## **Application for Employment**

Today's Date

Your Personal Information					
Name	First	Middle			
Address	City	State	Zip Code		
Home Phone	Home PhoneCell Phone				
Email Address					
Preferred Method of Contact:	☐ Home Phone ☐ Cell Phone ☐ Other	_			
Your Emergency Contact					
In Case of an Emergency, I Auth	orize You to Contact: Phone Number				

ALL QUESTIONS MUST BE ANSWERED
STATE "N/A" IF QUESTION IS NOT APPLICABLE

## FAIRVIEW GREENHOUSES AND GARDEN CENTER IS AN EQUAL OPPORTUNITY EMPLOYER

Applications are accepted and selection decisions are made without regard to race, sex (including sexual orientation, gender expression, and gender identity), pregnancy (including childbirth and related medical conditions), national origin, color, religion, age, disability, genetic information, military status, citizenship status, or any other protected classes under state, local, or county regulations. The receipt of this application does not mean that job openings exist and does not obligate us in any way. We appreciate your interest in our organization.

THIS IS A DRUG-FREE WORKPLACE

<b>Tell Us About Yourself</b> (You must answer <u>every</u> question on this application. If a question does not apply, put "N/A." Please print.)			
What position are you applying for?			
What is your salary expectation? \$ When can you start work? ( <i>Date</i> )			
How were you referred to us?			
Have you completed an application here before?   Yes No If yes, date/location			
Have you been employed here before? ☐ Yes ☐ No If yes, date/position/location			
Are you available to work (Check any that apply):			
Are there any days or times during the week that you are not available to work?  (Reasonable accommodation of religious needs that do not create an undue hardship will be considered, if applicable)  If yes, please list the days/times you are not available to work			
If necessary, can you provide proof that you are over any minimum work age requirement?			
Are you willing to work overtime? ☐ Yes ☐ No ☐ Do you have steady transportation to work? ☐ Yes ☐ No			
Can you travel, if required?  □ Yes □ No What percentage of time?			
Are you on a layoff and subject to recall?			
How much time have you lost from work during the past 12 months?			
Are you now, or do you expect to be, engaged in any other business or employment while working here?			
If yes, please explain			
Are you presently an officer, employee, or employer of another business in our industry or with whom we compete?   Yes   No			
If yes, please explain			
Are you currently subject to a non-compete agreement or restrictive covenant that would prohibit you from working at our company in the position for which you are applying?			
If yes, provide a copy of the agreement and state the name of the company:			
Have you ever been terminated or asked to resign from a job? ☐ Yes ☐ No			
If yes, please explain			
Why do you desire to make a change?			
Are you legally eligible to work in the United States?			
What three things are most important to you in a job? (1) (2) (3)			
What three adjectives best describe you? (1) (2) (3)			
What type of work do you most enjoy?			
Why do you want to work here?			
Tell Us About Your Special Skills and Qualifications			
List any special skills, training, experience, certifications, or licenses that may be relevant to this position or our company			
List any professional, trade, business, or civic activities or offices held that would relate to working here			
List any foreign languages that you fluently speak, read, and/or write that would relate to working here			
List software programs that you are proficient in			

Your Educational Background						
Schooling		Did You Graduate?	Years Completed	Degree Received and Major Subject	Name of School	Location
High School or GED		☐ Yes ☐ No				
Trade, Business, Correspondence		☐ Yes ☐ No				
College		☐ Yes ☐ No				
Graduate Schoo	ol	☐ Yes ☐ No				
Tell Us About Y	our D	riving Record (	Necessary for positions th	hat may require use of a pe	ersonal or company vel	nicle for work)
Do you hold a valid an	d unexpi	red driver's license tha	at is not currently suspe	nded or revoked?	☐ Yes ☐ No	
If yes, provide the state	e					
Have you been convict	ted of an	y moving violation(s) ir	n the last 5 years?	☐ Yes ☐ No		
If yes, give date(s) and	l explana	tion of each				
Tell Us About A	anv Re	ecords				
Have you ever been co	onvicted (	of, received a sentence		dere (no contest) to, be	en placed on probati	on, or fined
by any judicial or quas	•	•				
records should n	ot be disclo Ir employme	osed. Any other criminal rec ent offer or termination of yo	cord not disclosed by you ma	<b>employment</b> . Arrest recorday be considered falsification ordance with any state or federal	of this application, which	may result in
Your Military S	ervice					
Branch of Service		Ra	Rank at discharge, if applicable		Dates of Service	
					From: T	Го:
List Duties and Special Training and/or Skills						

Tell Us About Your Past (Answering ")	ves" to any of these question	ns is not an automatic bar to	employment.)	
Have you ever been disciplined or terminated from of a drug-free workplace policy, or theft?  ☐ Yes ☐ No If yes, explain the circums			rimination, ethical breach, violation	
Have you ever had any license or certification su	•			
	If yes, list the license(s) or certification(s) suspended or revoked and state when and why the license or certification was suspended or revoked.			
Your Work History and Any Empl List most recent or current job first. You must include a complete work history. If you need more space to pro	any gaps in employment, wit	th a full explanation and dates	s for the gap. You must also provide a	
Employer	Dates Employed		Summary of Work Performed	
	From (Mo/Yr)	To (Mo/Yr)	and Job Responsibilities	
Address (City, State, Zip)				
	Phone (Include Area Code)			
Job Title	Hourly Rate, Weekly Salary, or Other Weekly Earnings			
0	Starting	Final		
State Reason			Supervisor's Name	
Resigned ☐ OR Terminated ☐				
Employer	Dates Employed		Summary of Work Performed	
	From (Mo/Yr)	To (Mo/Yr)	and Job Responsibilities	
Address (City, State, Zip)				
	Phone (Include Area Code)			
Job Title	Hourly Rate, Weekly Salary, or Other Weekly Earnings			
	Starting	Final		
State Reason			Supervisor's Name	
Resigned □ OR Terminated □				

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	From (Mo/Yr)	To (Mo/Yr)	and Job Responsibilities	
Address (City, State, Zip)				
	Phone (Include Area Code)			
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	Starting	Final		
State Reason			Supervisor's Name	
Resigned ☐ OR Terminated ☐				
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	Starting	Final		
State Reason			Supervisor's Name	
Resigned ☐ OR Terminated ☐				
Employer	Dates Employed		Summary of Work Performed	
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Employer	Dates Employed		Summary of Work Performed	
	From (Mo/Yr)	To (Mo/Yr)	and Job Responsibilities	
Address (City, State, Zip)				
	Phone (Include Area Code)			
Job Title	Hourly Rate, Weekly Salary, or Other Weekly Earnings			
	Starting	Final		
State Reason			Supervisor's Name	
Resigned  OR Terminated				
Agreement and Release				
The facts set forth above in my application for employment are true and complete. I understand that false statements or omission of information on this application (even if discovered after employment) or any other employment form may lead to dismissal or denial of employment. If required, I agree to submit to any drug or alcohol testing prior to or after employment. I understand that submission of this application does not imply I will be hired.				
I authorize the use of any information in this application to verify my statements, and I authorize past employers, all references, and any other persons to answer all questions asked concerning my ability, character, reputation, and previous employment record.				
I understand that if my application is accepted and I am hired, employment at Fairview Greenhouses and Garden Center is "employment at will." It is further understood that this at-will relationship may not be changed by any written document, verbal statements, or by conduct unless an authorized executive of Fairview Greenhouses and Garden Center specifically acknowledges such change. I further understand that my at-will employment may be terminated at any time by me or by Fairview Greenhouses and Garden Center and includes no guarantee, contract, or promise of employment for any specific length of time. I understand that the first 90 days of employment is a new-hire introductory period.				
I have read, understand, and by my signature consent to these statements.				
Signature of Applicant			Date	

State and/or federal regulations are subject to change at any time; therefore, the questions on this form are subject to exceptions and qualifications. The author does not bear responsibility for ensuring this form is up to date and compliant with state, federal, or local employment regulations. If in doubt, seek assistance from a qualified expert.

Also, the author is not responsible for any unauthorized changes or omissions to the form.

Revised changes or omissions to the form.