

# Shoemaker's Landscaping & Fencing

## APPLICATION FOR EMPLOYMENT

**PERSONAL INFORMATION** Complete all applicable information

Name (Full – Last, First, MI)		S.S.#	
Position(s) applied for:		Are you willing to work: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> Weekends <input type="checkbox"/> Evenings <input type="checkbox"/> Nights	
Street Address:	City	State	Zip
Home Phone	Cell Phone	Have you previously been employed by our company? Yes <input type="checkbox"/> No <input type="checkbox"/> Where?	
Are you legally authorized to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		When could you start employment?	
Have you ever applied for employment with our company? Yes <input type="checkbox"/> No <input type="checkbox"/> When? _____ Where? _____			

**EMPLOYMENT HISTORY (List below last three employers, starting with the most recent one first)**

Present or Last Position	Name of Company	From Mo/Yr	To Mo/Yr
Street Address:		City	State Zip
Duties:		Reason for Leaving:	
Starting Annual Salary	Final Annual Salary	Bonus	Commission
Name of Supervisor		Title and Department of Supervisor	Phone Number of Supervisor

Next Previous Position	Name of Company	From Mo/Yr	To Mo/Yr
Street Address:		City	State Zip
Duties:		Reason for Leaving:	
Starting Annual Salary	Final Annual Salary	Bonus	Commission
Name of Supervisor		Title and Department of Supervisor	Phone Number of Supervisor

Next Previous Position	Name of Company	From Mo/Yr	To Mo/Yr
Street Address:		City	State Zip
Duties:		Reason for Leaving:	
Starting Annual Salary	Final Annual Salary	Bonus	Commission
Name of Supervisor		Title and Department of Supervisor	Phone Number of Supervisor

**EDUCATION INFORMATION**

High School or GED	Address	City	State	Degree	Subjects Studied	
College	Address	City	State	Degree	Major	GPA
College	Address	City	State	Degree	Major	GPA
Graduate School	Address	City	State	Degree	Major	GPA
Other	Address	City	State	Degree	Major	GPA

**GENERAL**

Additional Space (if needed):

If applying for a landscape construction/fence installation position, do you have a valid driver's License? Yes \_\_\_ No \_\_\_  
What specific landscape or fence installation training have you had?

If applying for a general office position:  
Do you have computer skills? Yes \_\_\_ No \_\_\_  
Words/Minute:

If applying for a general office position:  
Accounts Receivable skills Yes \_\_\_ No \_\_\_  
Accounts Payable skills Yes \_\_\_ No \_\_\_

In what computer software programs are you **proficient**? [Name the package(s).]

**PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY**

In consideration of my employment, I agree to conform to the policies and procedures of Shoemaker's Landscaping & Fencing. I understand that in accepting this application, Shoemaker's Landscaping & Fencing is in no way obligated to provide me with employment and that I am not obligated to accept employment if offered. Furthermore, if employed, I understand that I am employed at will and that my employment can be terminated with or without cause, and with or without notice at any time.

I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that any falsified statements on this application or omission of fact on either this application or during the pre-employment process will result in my application being rejected, or, if I am hired, in my employment being terminated.

I understand that this application is valid for ninety (90) days from the date I sign it. If I expect consideration beyond that date, I understand it is necessary to resubmit another completed application.

I also understand that any offer of employment is conditioned on the completion of pre-employment tests and documentation. I will, upon request, sign all necessary consent forms.

Date

Signature

**FOR OFFICE USE ONLY**

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