



Application for Employment

Lawn Patrol Service Incorporated

Employment Interest

Current Date (m/d/yy) _____ Date Available (m/d/yy) _____ Position Desired _____ Minimum Salary Desired _____

What work schedule are you seeking?
 Full-time
 Part-time
 Temporary
 Temporary-to-hire
 On-call

Have you ever applied to this company before?
 Yes
 No
 If yes, when? _____

From what specific source did you first learn of this position? _____

Personal Data

Last Name _____ First Name _____ Middle Name _____ Social Security Number (optional) _____

Street Address _____ Home Phone _____

City _____ State _____ Zip _____ Cell Phone _____

Employment History

Please list all employment activity for the past 10 years, starting with your most recent position. A resume may be attached but will not be accepted in place of any information required on this form.

Dates (mm/yy)	From:	to	Name of Employer:
Starting Salary:			Address:
Ending Salary:			Name and Title of Immediate Supervisor:
Telephone Number:			Your Title:
Reason for leaving or wishing to leave:			Duties:
May we contact this employer? <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Yes, but only after I have given current employer my notice to terminate employment.			

Dates (mm/yy)	From:	to	Name of Employer:
Starting Salary:			Address:
Ending Salary:			Name and Title of Immediate Supervisor:
Telephone Number:			Your Title:
Reason for leaving or wishing to leave:			Duties:
May we contact this employer? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Dates (mm/yy)	From:	to	Name of Employer:
Starting Salary:			Address:
Ending Salary:			Name and Title of Immediate Supervisor:
Telephone Number:			Your Title:
Reason for leaving or wishing to leave:			Duties:
May we contact this employer? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Dates (mm/yy) From: to	Name of Employer:
Starting Salary:	Address:
Ending Salary:	Name and Title of Immediate Supervisor:
Telephone Number:	Your Title:
Reason for leaving or wishing to leave:	Duties:
May we contact this employer? <input type="checkbox"/> No <input type="checkbox"/> Yes	

Dates (mm/yy) From: to	Name of Employer:
Starting Salary:	Address:
Ending Salary:	Name and Title of Immediate Supervisor:
Telephone Number:	Your Title:
Reason for leaving or wishing to leave:	Duties:
May we contact this employer? <input type="checkbox"/> No <input type="checkbox"/> Yes	

Dates (mm/yy) From: to	Name of Employer:
Starting Salary:	Address:
Ending Salary:	Name and Title of Immediate Supervisor:
Telephone Number:	Your Title:
Reason for leaving or wishing to leave:	Duties:
May we contact this employer? <input type="checkbox"/> No <input type="checkbox"/> Yes	

Dates (mm/yy) From: to	Name of Employer:
Starting Salary:	Address:
Ending Salary:	Name and Title of Immediate Supervisor:
Telephone Number:	Your Title:
Reason for leaving or wishing to leave:	Duties:
May we contact this employer? <input type="checkbox"/> No <input type="checkbox"/> Yes	

Education

Please complete for all that apply.

	School / Organization Name	Location (City/State)	Field of Study / Degree
<input type="checkbox"/> Some high school			
<input type="checkbox"/> High school graduate / G.E.D.			
<input type="checkbox"/> Some college			
<input type="checkbox"/> Associate degree			
<input type="checkbox"/> Bachelor's degree			
<input type="checkbox"/> Master's degree			
<input type="checkbox"/> Doctorate degree			
<input type="checkbox"/> Professional certification			

References

Please provide at least three references from previous and/or current supervisors.

Name	Company	Title	Phone / Email

Other Pertinent Information

Are you 18 years of age or older? Yes No

If hired, you will be required to furnish proof that you are legally authorized to work in the United States.

If under 18 years of age, can you furnish a work permit on or before your first day of work? Yes No

Are you able to perform the essential duties of the job(s) for which you are applying, as described, with or without reasonable accommodation? Yes No

Have you ever been convicted of any crime as an adult (excluding traffic violations other than felonies)? A conviction includes a plea, verdict, or finding of guilt, regardless of whether sentence is imposed by the court. *A criminal conviction will not necessarily disqualify an applicant from employment.* Yes No

If yes, explain:

Do you have any relatives working for this organization? Yes No

If yes, please provide name, department for which the individual works, and your relationship to the individual.

Applicant Statement

I certify that the answers given in this application are true and correct and that I have not withheld any facts or circumstances. I understand that all answers given on my application for employment are subject to verification. I understand that if I'm employed by Lawn Patrol Service Incorporated, any false statement, misrepresentation, or omission of facts on this application of employment or on any supporting documents, regardless of when discovered to be false or omitted, may be sufficient reason for immediate dismissal.

I understand that the information provided in my application for employment will be verified, including academic background, employment history, and any criminal convictions which may be on my record. I give Lawn Patrol Service Incorporated consent to conduct a background and criminal record check. I also authorize my past employers and schools to give to Lawn Patrol Service Incorporated pertinent information about me. I also understand that all offers of employment are contingent upon verification of the information provided in my application of employment.

Signature: _____

Date: _____

Print Name: _____