



GROWING CONCERNS
PLANT HEALTH SERVICES

APPLICATION FOR EMPLOYMENT

PERSONAL

Name _____ Date _____
Street Address _____ Apartment Number _____
City _____ State _____ Zip Code _____
Telephone Number _____ Social Security Number _____

REFERRED BY

- Newspaper What paper? _____
- Radio What Station? _____
- Other Please explain _____
- Growing Concerns Give employee's name _____

GENERAL

Are you currently employed? Yes No May we contact your present employer? Yes No
Have you worked for Growing Concerns before? Yes No
If yes, what year(s)? _____ Reason for leaving _____
For what position are you applying now? Crew Leader Laborer Other, _____
Salary desired? \$ _____ per _____ Date you are available for work _____
How many hours per week do you want to work? _____ Are you willing to work weekends? Yes No
Are you at least 18 years old? Yes No
If hired, can you provide proof you are eligible to work in the United States? Yes No

TRANSPORTATION

Do you have reliable transportation to and from work? Yes No
If no, would you be interested in some assistance finding transportation? Yes No
If yes, would you be willing to offer other employees a ride? Yes No

EDUCATION

Highest elementary or high school grade completed _____

Level	School Information	Years Attended	Degree Obtained
High School	Name City State	From To	
College, University, Other	Name City State	From To	

EMPLOYMENT HISTORY

List your previous employers, starting with your most recent.

Employment Dates	Company Information	Salary	Job Title	Reason for Leaving
From To	Name Address City, State Phone Supervisor	Starting Leaving		
From To	Name Address City, State Phone Supervisor	Starting Leaving		
From To	Name Address City, State Phone Supervisor	Starting Leaving		

Please explain any periods of unemployment. _____

SKILLS/EXPERIENCE

Please list any other skills or equipment operating abilities (lawn equipment, machinery, 10-key, calculator, personal computer etc.) you have which might be useful on the job for which you are applying.

List any professional organizations, volunteer organizations or activities you are involved with that you feel warrant consideration. _____

Please explain in a brief paragraph why you feel you should be hired by **Growing Concerns, Inc.** _____

PHYSICAL ABILITY

If applying for a field position, most field positions at **Growing Concerns** require a great amount of physical work. Some examples of such work would include, but not be limited to, heavy lifting, repetitive motion, operation of power equipment, working for 10 or more hours a day, working outside in all weather conditions. Do you have any physical defects or disabilities which would prevent you from performing this type of work? Yes No

Do you have any other physical defects, disabilities, or limitations which could affect your ability to perform the job for which you are applying with our without reasonable accommodations? Yes No

If yes to either of the above questions, please explain in detail. _____

LEGAL

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

Do you have a commercial driver's license? Yes No

Do you have any problem with your driving record? Yes No If yes, please explain _____

Have you ever been convicted of a crime, excluding traffic violations? Yes No If yes, please explain
(A conviction will not necessarily exclude you from employment) _____

MEDICAL

Are you currently on any form of prescribed medication which contains warnings against driving or operating vehicles or machinery? Yes No If yes, explain _____

Are you currently using any form of illicit drug? (Marijuana, Cocaine, Speed etc.) Yes No

If yes, explain _____

Do you consume alcoholic beverages? Yes No

If yes, how much and what frequency? _____

This institution does not discriminate in hiring or any other decision on the basis or race, color, sex, citizenship, national origin, ancestry, or on the basis of age or physical or mental disability unrelated to ability to perform the work required. No question on this application is intended to secure information to be used for such discrimination.

" I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, and release all parties from all liability for any damage that may result from furnishing same to you. I understand that if hired, I will be required by federal law to provide evidence that I am a U.S. citizen or an alien authorized to work in the United States. I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice and without cause. I understand that I may be required to submit to a confidential drug screening as a condition of employment."

Signature _____ Date _____