



JOB APPLICATION

APPLICANT

NAME	HOME PHONE	WORK PHONE	CELL PHONE
STREET	CITY, STATE AND ZIP		

ARE YOU A LEGAL RESIDENT OF THE UNITED STATES? ____YES ____NO

HAVE YOU EVERY APPLIED TO GREENWOOD NURSERY BEFORE? __YES __NO
 IF YES, WHEN?_____ WHERE? _____

HAVE YOU EVER BEEN EMPLOYED BY GREENWOOD NURSERY BEFORE? __YES __NO
 IF YES, WHEN?_____ WHAT LOCATION?_____

POSITION DESIRED	AVAILABLE START DATE	AVAILABLE HOURS
DESIRED WAGE	ARE YOU CURRENTLY EMPLOYED?	ARE YOU AVAILABLE TO WORK WEEKENDS?

EDUCATION HISTORY	# YEARS ATTENDED	YEAR GRADUATED	DEGREE
HIGH SCHOOL			
VOCATIONAL SCHOOL			
UNDERGRADUATE SCHOOL			
GRADUATE SCHOOL			

DESCRIBE ANY SPECIAL QUALIFICATIONS FOR THIS JOB

WORK EXPERIENCE**STARTING WITH MOST RECENT****EMPLOYER 1:**

ADDRESS	CITY	STATE	ZIP	PHONE #
SUPERVISOR NAME	JOB TITLE/POSITION	REASON FOR LEAVING		
DATES OF EMPLOYMENT: FROM: _____ TO: _____		WAGE: START: _____ FINISH: _____		

EMPLOYER 2:

ADDRESS	CITY	STATE	ZIP	PHONE #
SUPERVISOR NAME	JOB TITLE/POSITION	REASON FOR LEAVING		
DATES OF EMPLOYMENT: FROM: _____ TO: _____		WAGE: START: _____ FINISH: _____		

EMPLOYER 3:

ADDRESS	CITY	STATE	ZIP	PHONE #
SUPERVISOR NAME	JOB TITLE/POSITION	REASON FOR LEAVING		
DATES OF EMPLOYMENT: FROM: _____ TO: _____		WAGE: START: _____ FINISH: _____		

I CERTIFY THAT ANSWERS GIVEN HEREIN ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I AUTHORIZE INVESTIGATIONS OF ALL STATEMENTS CONTAINED IN THIS APPLICATION FOR EMPLOYMENT AS MAY BE NECESSARY IN ARRIVING AT AN EMPLOYMENT DECISION. I UNDERSTAND THAT THIS APPLICATION IS NOT INTENDED TO BE A CONTRACT OF EMPLOYMENT. IN THE EVENT OF EMPLOYMENT, I UNDERSTAND THAT FALSE OR MISLEADING INFORMATION GIVEN ON MY APPLICATION OR INTERVIEW MAY RESULT IN TERMINATION.

SIGNATURE _____ DATE _____