

Applicant Information

Please complete the information requested below. An incomplete application may affect your consideration for employment.

Position(s) applying for: _____ Date of application: _____

Salary Range: _____

Referral Source: Advertisement Relative Friend Employment Agency Other _____

Applicant's name: _____

First

Middle

Last

Address: _____

Street Address

City

State

Zip

Telephone No(s): _____ Cellular No(s): _____

Email: _____

Are you legally authorized to work in the US?Yes No

(proof of citizenship and/or immigration status will be required upon employment)

Do you now, or will you in the future, require immigration sponsorship for work authorization?:.....Yes No

If you are under 18, can you furnish a work permit?:Yes No

Is this the first time you have applied for a position here?:Yes No

If no, please provide date of application, position applied for and, if hired, dates of employment and reason(s) for separation: _____

On what date are you first available to work: _____ What is your desired salary range or hourly rate of pay? _____

Are you available to work? (check all that apply): Full-time Part-time Seasonal Temporary

Are you on lay-off and subject to recall?Yes No

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

(proof of a valid driver's license will be required upon employment if the position requires travel): _____

Employment History

Identify requested information for your last three (3) employers in chronological order with present or last employer identified first:

Name of Employer: _____ Address: _____

Telephone Number: _____

Job title/position: _____ Start and end dates of employment (month and year):

Start Month ____ Year ____ End Month ____ Year ____

Name of supervisor: _____ Start Pay: _____ End Pay: _____

Reason for leaving: _____

Describe your duties: _____

Name of Employer: _____ Address: _____

Telephone Number: _____

Job title/position: _____ Start and end dates of employment (month and year):

Start Month ____ Year ____ End Month ____ Year ____

Name of supervisor: _____ Start Pay: _____ End Pay: _____

Reason for leaving: _____

Describe your duties: _____

Name of Employer: _____ Address: _____

Telephone Number: _____

Job title/position: _____ Start and end dates of employment (month and year):

Start Month ____ Year ____ End Month ____ Year ____

Name of supervisor: _____ Start Pay: _____ End Pay: _____

Reason for leaving: _____

Describe your duties: _____

Education History

Type of school/program:	School name and location:	Highest grade completed:	Degree/GPA:	Course of study or major:
High School / GED				
College / University				
Vocational Trade School				
Graduate School				
License / certificate program				
Other				

Special Skills

Identify any special skills and qualifications for the position(s) to which you are applying:

References

Please provide Russell's Tree & Shrub Farm LLC with names, addresses and telephone numbers of former employers or other relevant contacts we can call for references (none of whom may be relatives):

Name, Address & Telephone No.	Position, Title or Relationship to Applicant	Years Known

For purposes of verifying information on this application, have you ever worked or attended school under a different name at any of the organizations you have identified?:Yes No

If yes, please provide names:

Equal Opportunity Employer Statement

Russell's Tree & Shrub Farm LLC ("Russell's") is an equal opportunity employer and does not discriminate on the basis of race, color, sex, age, disability, religion, citizenship, national origin, ancestry, military status or veteran status, marital status, sexual orientation, domestic violence victim status, predisposing genetic characteristics and genetic information, or any other categories protected by federal, state or local laws. Applicants with disabilities may be entitled to reasonable accommodations under federal and state laws.

Applicant's Statements

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I authorize Russell's to contact the above references and employers listed in my employment history to verify the information provided in this application and my qualifications for the position for which I have applied.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I also understand that I am required to abide by all policies and regulations of Russell's.

I understand that neither this application nor any offer of employment from Russell's constitutes an employment contract unless a specific document to that effect is executed by Russell's in writing.

I understand and agree that, if employed, my employment is employment at will and may be terminated by either myself or Russell's at any time, with or without notice, and for any reason or no reason at all, unless otherwise prohibited by law.

I understand that this application remains active with Russell's for no more than 45 days. If I am not contacted by Russell's within 45 days of submitting this application, I must submit another application to be considered for any position at Russell's.

I certify that I have read, fully understand and accept all terms of the Applicant's Statements above.

Signature of Applicant

Applicant's Name (Please Print)

____/____/____
Date