

NATURE'S VIEW LANDSCAPING EMPLOYMENT APPLICATION

PERSONAL INFORMATION

Name (last, first, middle)	
Street Address	How long at this address?
City	State Zip Code
	Work Phone #
Cell Phone #	Date of Birth
Social Security No	Drivers License No
EMPLOYMENT DESIRED	
Position/type of work desired	Salary/wage desired
Date when you can start	Do you have school in Spring? Fall?
Days/hours available to work No Pref	Mon Tue Wed Thu Fri Sat Sun
How do you feel about working Evenings	Long Hours? Travel?
Are you currently employed?	If so, may we inquire of you present employer? Y N
What did you like most about your last emp	yer?
What did you like least about your last emp	yer?
How did you hear about Nature's View Lan	caping/ job opening?
EDUCATION Name and Location of Scho	Years Did you Subjects
	Completed graduate? studied
Grammar School	
High School	
College	
Bus. Or Trade School	
Other Training/School	
Special Studies and/or Honors	
Activities and/or Organizations	



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MILITARY SERVICE

Have you served in the U.S. Armed Forces? If yes, v	what hranch
How long? Date of Discharge? Rank of	
List special training and/or honors	
GENERAL	
Your job may involve heavy lifting, stooping, turning, twisting	g, bending, and related physical motion and
effort. Do you know of any reason why you may be susceptib	ole to injury as a result, or do you know of any
reason why you could not fulfill these job duties?	If yes, describe
Have you ever been convicted of a crime? If yes,	, describe
Do you have a valid driver's license?	
If yes, what class? Class D Class C Class B	Class A
Have you had any accidents during the past three years?	If yes, how many?
Have you had any moving violations during the past three year	irs? If yes, how many?

FORMER EMPLOYERS (LIST BELOW LAST FOUR EMPLOYERS, STARTING WITH LAST ONE FIRST)

Month and Year	Name & Address of Employer	Salary	Position	Reason for Leaving
From				
То				
From				
То				
From				
То				
From				
То				



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REFERENCES (PLEASE LIST TWO REFERENCES OTHER THAN RELATIVES WHO WOULD HAVE KNOWLEDGE OF YOUR WORK PERFORMANCE AND QUALIFICATIONS.)

Name	Name	
Position	Position	on
Company	Comp	any
Address	Addre	ss
Telephone	Telepl	none

APPLICATION FORM WAIVER

In exchange for the consideration of my job application by Nature's View Landscaping, Inc. (herein called "the Company"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Nature's View Landscaping, Inc., or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President/Co-Owner of the Company. Both the undersigned and Nature's View Landscaping may end the relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reductions in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company form any liability as a result of such contract.

I also understand that (1) the Company has a drug and alcohol policy that provides for pre-employment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of you employment application, the Company may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, the Company, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with the Company shall be probationary for a period of sixty (60) days, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.

Signature of applicant	Date	

This Company is an equal opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.