

LINTON'S

EMPLOYMENT APPLICATION

The questions on this form are being asked to properly evaluate your skills, abilities, interests and experience in relation to the position for which you are applying. Every effort has been made to comply with applicable state and federal laws. It is not our intent to discriminate in employment by reason of color, race, sex, religion, age, national origin, disability, or veteran status.

Position Desired (Please number in order of preference):
 Garden Center (Outside Sales)
 Floral and Gift Shop (Inside Sales)
 Nursery Staff

Landscape Installation (planting trees & shrubs)
 Landscape Maintenance (mowing lawns, weeding)
 Management
 Cafe

Do you desire: Permanent Work *or* Temporary Work?

Full-Time Work *or* Part-time Work?

When Available? _____

Date of Application _____

Name

Last First Middle Initial

Present Address

Number Street City State Zip

Present Phone Number (Area Code _____) Social Security Number

_____/_____/_____

Alternative Phone Number to Contact: (Area Code

_____) _____

If under 18 years old, can you provide proof of age? Yes No

Do you have a driver's license? Yes No Are you legally eligible for employment in the U.S.? Yes No

Please Note: If accepted for employment, you will be required to furnish documentation establishing your citizenship or right to work in the U.S. Said documentation must satisfy requirements of INS for I-9 and must be produced within one business day from date of employment.

Have you been convicted of felonies or crimes other than misdemeanors or minor traffic violations? Yes No

If yes, please explain:

Have you applied here before? Yes No If yes, when?

Have you worked for Linton's before? Yes No If yes, when?

Please list any relatives or friends working for Linton's:

May we contact your present employer? Yes No N/A Expected Compensation: _____

Are you willing to take a drug screen test? Yes No

EDUCATIONAL RECORD

Elementary

High School

College

Vocational Training

Name of School

City / State

Years Completed (circle) 4 5 6 7 8 9 10 11 12 1 2 3 4

Diploma / Degree

Specialized training, skills, and extracurricular activities _____

MILITARY SERVICE RECORD

Active Duty From _____ To _____ Date of Discharge

Rank at time of Discharge _____ Reserve Status

Special Training Received

Skills Acquired

RECORD OF EMPLOYMENT

(List present employer first)

COMPANY NAME _____ City/State _____

Phone _____

From ____/____/____ To ____/____/____ Starting Pay _____ Pay when Leaving

Type of Business _____ Position Title _____ Immediate

Supervisor _____

Nature of work/responsibilities

_____ Number of people

supervised _____

Reason for leaving

What did you like best about this job?

What did you like least about this job?

COMPANY NAME _____ City/State _____

Phone _____

From ____/____/____ To ____/____/____ Starting Pay _____ Pay when Leaving

Type of Business _____ Position Title _____ Immediate

Supervisor _____

Nature of work/responsibilities

_____ Number of people supervised _____

Reason for leaving

What did you like best about this job?

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From ____/____/____ To ____/____/____ Starting Pay _____ Pay when Leaving

Type of Business _____ Position Title _____ Immediate

Supervisor _____

Nature of work/responsibilities

_____ Number of people supervised _____

Reason for leaving

What did you like best about this job?

What did you like least about this job?

Do you possess any professional licenses or certifications? Yes No

If so, please list:
