

Name: _____ Date: _____

Address: _____ D.O.B. _____

Phone: _____

Valid WI. Driver's License: _____ CDL? Y N A B C D

Social Security / Insurance # _____

Position applied for: _____ Date available: _____

Salary expected: _____ Hours available: _____ Overtime/Weekends Y N

EDUCATION HISTORY	NAME & LOCATION	DEGREE/TOPICS
High School		
University/College		
Other		

EMPLOYMENT HISTORY

Employer:	Job Title:
Address:	Duties:
Phone:	Reason For Leaving:
Employed from:	Salary:

Employer:	Job Title:
Address:	Duties:
Phone:	Reason For Leaving:
Employed from:	Salary:

Any physical/weight restrictions? N Y If yes, what?

Any allergies ie: bees, pollen, plants, etc...? _____

Please check any of the items below that you have experience in:

- Turf Maintenance
- Turf Fertility/Pesticide
- Pruning Ornamentals/Trees
- Bed Maintenance/Weeding
- Turf Installation
- Hardscape Installation (Walls, pavers)
- Tree/Shrub/Plant Installation
- Landscape Design
- Garden Center Sales
- Snow Removal/Plowing
- Floral Design/Arrangements
- Concrete Installation (Flat or Stamped)
- Mechanical/Equipment Repairs

Are you a licensed Wisconsin pesticide applicator? **Y** **N**

If so, list Certification #: _____ Categories #: _____

Mechanical abilities:

Equipment Experience (List name brands and types):

REFERENCES

(Please include a minimum of 2 previous work related references.)

NAME:	OCCUPATION:	PHONE:
1.		
2.		
3.		

The information provided on this application is accurate to the best of my knowledge and subject to verification by this company. I understand I must truthfully answer all the questions on this application. I also understand that if I do not, I may be refused employment, or separated if I am a current employee.

Signature: _____ Date: _____