

## **EMPLOYMENT APPLICATION**

The following information will be used to assess your suitability for work and will be kept confidential. To help insure a fair evaluation, please complete the entire application and provide as much detail as possible. ***J's Lawn Care, Inc.*** does not discriminate on the basis of age, race, color, religion, creed, gender, national origin, sexual preference, or any other characteristic protected by law. Please do not list any information that would identify any of such protected characteristics.

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Name \_\_\_\_\_ \*Social Security Number \_\_\_\_\_  
(First Middle Last) Print Clearly

\*Contact Telephone Number (list any other cell#s) (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

\*Home Address: \_\_\_\_\_

City \_\_\_\_\_ State: Ohio Zip Code \_\_\_\_\_

Emergency Contact/Alternate Phone Number (for emergency/medical issue list name/telephone number of a contact person)

Name \_\_\_\_\_ Contact Phone Number \_\_\_\_\_

Marital Status (for insurance purposes) Married / Single (Circle)

\*Do you have a Valid Driver's License? \_\_\_\_ (yes/no)

\*Driver's License # \_\_\_\_\_ State \_\_\_\_ (put State if NOT an Ohio License)

\*Do you have a Commercial Driver's License (CDL)? \_\_\_\_ (yes/no)

\*Commercial Driver's License (CDL) # \_\_\_\_\_ State \_\_\_\_ (put State if NOT an Ohio License)

Can you show proof of legal authorization to work in the U.S.? \_\_\_\_ (yes/no)

When can you begin work? \_\_\_\_\_

Workweek is typically Monday through Friday, the workday begins at 7:30 am and ends at 5:30 pm (ending time may vary). Are you able to comply with this work schedule including working extended workdays or Saturdays if needed \_\_\_\_ (yes/no)

Do you have reliable transportation to get to/from work? \_\_\_\_ (yes/no)

Do you have any felony convictions as an adult? (This will not necessarily disqualify you) \_\_\_\_ (yes/no)

If yes, please describe; include dates discharged and current disposition/current status \_\_\_\_\_

Please describe any special training, work programs, apprenticeships, mentor programs, or special skills. Be specific (for example: commercial mowing experience, construction/ building experience work that you performed, skills, experience: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What types of machines can you operate? (For example: commercial mower, chainsaw, etc.): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever installed brick or concrete pavers, decks, fences, stone retaining walls, or irrigation? \_\_\_\_ yes/no. If yes, for whom? \_\_\_\_\_  
\_\_\_\_\_

How did you hear about us? Referred by \_\_\_\_\_; Walk-in\_; Sign\_; College Placement\_; Newspaper\_

What do you feel will separate you from all other applicants? Indicate any personal strengths or qualities you possess.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**EDUCATION**

	<i>Course of Study</i>	<i>Years Completed</i>	<i>Diploma/Degree</i>
HIGH SCHOOL (LAST SCHOOL ATTENDED)			
COLLEGE			
*Other Technical/Trade School/Work program			

**WORK/EMPLOYMENT HISTORY**

<b>EMPLOYER NAME</b>	<b>BUSINESS ADDRESS</b>	<b>TELEPHONE #</b>	<b>WAGES (HOURLY)</b>
			BEG. _____ ENDING _____
<i>List Job Title and Duties/Responsibilities:</i> _____ _____			
<i>Reason for leaving:</i> _____			

<b>EMPLOYER NAME</b>	<b>BUSINESS ADDRESS</b>	<b>TELEPHONE #</b>	<b>WAGES (HOURLY)</b>
			BEG. _____ ENDING _____
<i>List Job Title and Duties/Responsibilities:</i> _____ _____			
<i>Reason for leaving:</i> _____			

<b>EMPLOYER NAME</b>	<b>BUSINESS ADDRESS</b>	<b>TELEPHONE #</b>	<b>WAGES (HOURLY)</b>
			BEG. _____ ENDING _____
<i>List Job Title and Duties/Responsibilities:</i> _____ _____			
<i>Reason for leaving:</i> _____			

<b>EMPLOYER NAME</b>	<b>BUSINESS ADDRESS</b>	<b>TELEPHONE #</b>	<b>WAGES (HOURLY)</b>
			BEG. _____ ENDING _____
<i>List Job Title and Duties/Responsibilities:</i> _____ _____			
<i>Reason for leaving:</i> _____			

**PLEASE READ ALL OF THE FOLLOWING BEFORE SIGNING**

I certify that the information shown on this application is correct and complete to the best of my knowledge and that I have not knowingly withheld any fact or circumstance. I understand that falsifying or omitting information on this form may cause me to be disqualified from further consideration or dismissed from employment if hired.

All employment offers are made contingent upon satisfactory proof or legal authorization to work in the United States according to the law. I understand that failure to provide satisfactory proof of identity and authorization to work in the United States will disqualify me from employment.

I understand that if hired, my status will be that of an employee at will, with no contractual right, express or implied, to remain employed. In consideration of my employment, I specifically agree that my employment may be terminated, with or without cause or notice, at any time, at the option of either the employer or myself. I understand that no one, other than the President of the Company, in writing, may enter any agreement for employment on my behalf or make any agreement contrary to the foregoing.

I understand that, if hired, I may be required to undergo a physical examination and drug and alcohol screening test either: if I should become involved in an accident while on duty, on company premises, on job sites, or in a company vehicle; or if a reasonable suspicion of drug or alcohol use exists based on my performance, appearance and/or behavior. The examination and test will be performed by the employer's choice of physician.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. In addition to authorizing the release of any information about my employment, I hereby fully waive any rights or claims against my former employer and its agents, employees, and representatives. I release J's Lawn Care, Inc. and its agents, employees, and representatives from any and all liability, claims, or damages that may directly or indirectly result from the use, disclosure, or release of any information by any person or party, whether such information is favorable or unfavorable to me.

I acknowledge that I have read this authorization and release, fully understand it, and fully and voluntarily agree to its provisions.

\_\_\_\_\_  
(Applicant's Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Printed Name)

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