



A Plus Lawn and Landscape Inc.
 309 Sunset Dr.
 Lawrenceburg, KY 40342
 (502) 859-4706
 info@apluslawnlandscape.com

Employment Application

Date of Birth: _____ Date: _____

Name: _____
First Middle Last Maiden (if applicable)

Social Security Number: _____ Referral Source: _____

Current Address _____
Street Address City State Zip

Phone Number: () _____ () _____ () _____

Date Available: _____ How Long at this address: _____

Position Applied For: _____ Hourly Rate Expected: _____

Full-time or part-time? _____ How were you referred to us? _____

Whom do you know in our company? _____

What days can you work? _____

Are you between the ages of 18 and 70? Yes or No If No state age: _____

Are you a United States citizen? Yes or No

Have you ever been convicted of a crime? Yes or No If so, explain _____

Do you have a valid driver's license? Yes or No DL Number: _____

Person to notify in case of emergency (name and phone number): _____

List all Green Industry Companies that you have worked for: _____

List all equipment that you have experience and/or certification to operate?

Education

Type of School	Name and Location of School	from M./Year	to M./Year	Degree or Diploma
High School				

Univ./College				
Univ./College				
Trade School or other				

List any professional licenses or certifications that you currently possess:

Title of License or Certification	State or Organization of Issuance	License #	Date
Title of License or Certification	State or Organization of Issuance	License #	Date
Title of License or Certification	State or Organization of Issuance	License #	Date

Community Involvement

(optional)

List any and all organizations, affiliations or memberships that you are involved with in the community?

Name
Name
Name

Employment History

Present and previous employment including military service
(show most recent or current employment first)

May we contact present employer? Yes No

Starting Rate	Company	Address
\$	City/State/Zip	Phone ()
From mo. ____ yr. ____ To mo. ____ yr. ____	Title of position held and duties performed.	
Ending Rate	Supervisor's Name and Title	
\$	Reason for leaving	
Starting Rate	Company	Address
\$	City/State/Zip	Phone ()

From mo. ____ yr. ____ To mo. ____ yr. ____	Title of position held and duties performed.		
Ending Rate	Supervisor's Name and Title		
\$	Reason for leaving		
Starting Rate	Company	Address	
\$	City/State/Zip	Phone ()	
From mo. ____ yr. ____ To mo. ____ yr. ____	Title of position held and duties performed.		
Ending Rate	Supervisor's Name and Title		
\$	Reason for leaving		
Starting Rate	Company	Address	
\$	City/State/Zip	Phone ()	
From mo. ____ yr. ____ To mo. ____ yr. ____	Title of position held and duties performed.		
Ending Rate	Supervisor's Name and Title		
\$	Reason for leaving		

Personal References

Personal references (Excluding former employers or relatives)

Name	Occupation	Address	Telephone

Statement

To assist us in evaluating your qualifications for the position desired, use the space below for additional information describing your capabilities and career interest. (optional)

Agreement

I understand that any offer of employment shall be subject to reference inquiries, including but not limited to: information concerning my education, employment history, criminal record, general character and drug testing.

I understand and acknowledge that neither this application nor acceptance of employment with A Plus Lawn and Landscape, Inc. shall be used, or construed or deemed to create a contract of employment, expressed or implied, or any other promise of any kind. No verbal or written commitment to employ for a specified duration and no contract for employment, expressed or implied, shall be valid or binding on A Plus Lawn and Landscape, Inc. unless it is expressly set forth in a separate document and signed by the owner. A Plus Lawn and Landscape, Inc. HIRES AT-WILL. AT THE OPTION OF EITHER THE EMPLOYEE OR A Plus Lawn and Landscape, Inc., AN EMPLOYEE'S EMPLOYMENT CAN BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME.

All of the information on this application is a full and complete statement of facts and I realize that any false or incomplete information will be grounds for dismissal. I authorize inquiries as to my character and ability and I release those supplying any information from all liability. Upon my termination, whether by dismissal or resignation, I authorize the release of reference information regarding my employment.

I agree that a photocopy of this statement is to have the same effect as the original.

Signature of Applicant

Date _____