



## EMPLOYMENT APPLICATION

Please complete and submit this entire Employment Application.

### BASIC INFORMATION

<b>Position Desired:</b>		<b>Date:</b>	
<b>Name:</b>			
Last Name	First Name	Middle Name	
<b>Home Address:</b>			
Zip Code	Street	City	State
<b>Telephone:</b> Home: (    )		Cellular: (    )	E-mail
<b>Driver's License Number:</b>		<b>State:</b>	<b>Expiration Date:</b>

### EMPLOYMENT HISTORY

The information required below **must** be submitted on this Application. While you are welcome to attach a resume to this Application, it **will not** be accepted in lieu of completing any portion of this Application. For this section, please account for the last ten (10) years of employment beginning with your current or most recent employer. List all experiences that are relevant to the position for which you are applying.

Employer	Title	Employed:	
Address		From (mm/yy)	To (mm/yy)
Zip Code	Street	City	State
Supervisor's Name		Supervisor's Title	
Job Responsibilities:			
Employer	Title	Employed:	
Address		From (mm/yy)	To (mm/yy)
Zip Code	Street	City	State
Supervisor's Name		Supervisor's Title	
Job Responsibilities:			



Employer	Title	Employed: From (mm/yy)	To (mm/yy)
Address Zip Code	Street	City	State
Supervisor's Name	Supervisor's Title		
Job Responsibilities:			

### EDUCATION

Name of School	Location of School	Graduation Yes No	Degree
High School	City	State	
College	City	State	
Licenses/Certificates			
Please list all relevant Licenses and/or Certificates here:			

### ADDITIONAL INFORMATION

Are you legally authorized to work in the United States? Yes <input type="checkbox"/> No <input type="checkbox"/>	Did any F&B Landscaping employee recommend you for this position? Yes <input type="checkbox"/> No <input type="checkbox"/>
Can you speak, read, and/or write in English? Yes <input type="checkbox"/> No <input type="checkbox"/>	Can you speak, read, and/or write in Spanish? Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you at least 18 years of age? Yes <input type="checkbox"/> No <input type="checkbox"/>	Have you ever been fired from a job? Yes <input type="checkbox"/> No <input type="checkbox"/>

### REFERENCES

Name	Relationship	Telephone Number ( )
Name	Relationship	Telephone Number ( )
Name	Relationship	Telephone Number ( )

### IN CASE OF EMERGENCY NOTIFY

Name	Relationship	Telephone Number ( )
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Address

City and State

Zip Code

**PLEASE READ CAREFULLY**

*I fully understand this employment application, as well as other hiring documents, do not create an employment contract between F&B Landscaping, Inc. and me. I understand that if I am hired and any of my answers are deemed to be false or misrepresentations, then I may be terminated. I fully understand that my employment is "at will", meaning that either myself or F&B Landscaping, Inc. may terminate my employment at any time for any reason. I am fully aware and authorize F&B Landscaping, Inc. to conduct a background investigation and/or a pre-employment drug test and/or physical examination on me as a condition of my employment. I grant full permission to F&B Landscaping, Inc. to contact the above-mentioned references regarding my background. F&B Landscaping, Inc. is committed to providing access and reasonable accommodation in its employment for individuals with disabilities.*

Signature

Printed Name

Date

**OFFICE USE ONLY**

Date of Employment

Position

Hourly Pay Rate

Hire Approved By

References Checked and Notes

EOE

Revised 8/12/2019