

Application for Employment

PLEASE PRINT

Name					
(First)	(Middle	e)	(Last)		
Address					
(Street)			Home Ph	one #	Cell #
(City)	(State)	(Zip)			email address
Position applying for:		Who referred	you?		
Have you ever worked for this con	mpany before? Y or N	Dates:	From	to	_
If yes, what was your position? Are you currently employed? You		-			
IN CASE OF EMERGENCY NO	•				
Telephone #:	Relation	nship:			
		Education			
Name of School		Degree or Diplo	ma Major/Miı	<u>nor</u>	
High School:		Yes	No		
GED:		Yes	No		
College or University:		Yes	No D	Degree	
		General			
A	Are you available for work as	ny day of the wee	ek day or nigh	t? Y or N	
If no, please list your work availab					
	(Days)				(Hours)
Are you currently attending school	ol? Y or N If yes, please att	tach your class sc	hedule.		
Do you have any pre-existing con	ditions that could affect you	r ability to perfor	m strenuous o	utdoor activit	ies?
	Y or N	If yes please exp	lain		
	er weed eater zero turn trimmer chainsav	n mower walk be w pruning	g saw	forklift	
Skid loader garden	tractor farm trac	ctor dump to	ruck	sprayer	•

Employment History (past five years)

Company Name:		Dates employed: From_	to			
Contact Person:	Phone #:	Wage: Beginning:	Ending:			
Position:	Reaso	on for leaving:				
Duties:						
Company Name:		Dates employed: From	to			
Contact Person:	Phone #:	Wage: Beginning:	Ending:			
Position:	Reaso	Reason for leaving:				
Duties:						
Company Name:		Dates employed: From	to			
Contact Person:	Phone #:	Wage: Beginning:	Ending:			
Position:	Reaso	Reason for leaving:				
Duties:						
Company Name:		Dates employed: From	to			
Contact Person:	Phone #:	Wage: Beginning:	Ending:			
Position:	Reaso	on for leaving:				
Duties:			·			
	Volunteer or extrac					
Organization:		Contact Person:				
Duties:		Dates served: From	to			
Organization:		Contact Person:				
Duties:		Dates served: From	to			
		SIGN) THE BACK PAGE OF THIS				
my background to ascertain any and all liability for any damages on acc	d all information of concern to my emplo ount of furnishing such information. I un	It is agreed and understood that the employ yment history. I release employers and other aderstand that, as an applicant for a position tinent to the job for which I am applying for	r persons named herein from with Forever Green Inc. I may			
I also understand that misrepresenta	ation or omission of information or facts	may result in my rejection or dismissal.				
-	ules and policies of Forever Green Inc.					
This certifies that this application wknowledge.	as completed by me, and that all entries	on it and information in it are true and comp	lete to the best of my			
(Date)	(Applia	cant Signature)				

Driver Qualification

List Drivers Licenses held in the past three years (current license must be shown)

State	License #	Class	Endorsements	Expiration Date				
Have you	ever been denied a license, pe	ermit or privil	ege to operate a motor vehicle?	Y or N				
Has any license, permit, or privilege ever been suspended or revoked? Y or N								
Motor Vehicle Report Request								
	Ι,		aı	uthorize				
		(p	rint name)					
Forever Green Inc.to obtain my Motor Vehicle Record prior to hire and to check it periodically thereafter. I understand that this record may contain personal information including but not limited to child support payments, alimony payments as well as information on driver violations and accidents. I further agree to report any license suspensions, serious accidents or offenses, or any other condition to my supervisor immediately that may affect my ability to drive a company vehicle (or my own vehicle) after I am hired.								
I understand Forever Green Inc. will use this information for employment purposes only and not furnish this information to a third party without my written consent. I agree to release Forever Green Inc. its employees and those who supplied you with the information from any liability for any damage which may result from furnishing the requested information or my failure to be hired for the position for which I am applying.								
			Applicant Signature					
Your employment with our company may or may not be contingent upon us receiving a satisfactory motor vehicle report of your driving history depending on the position you are applying for. As a condition of employment, all employees must maintain a valid driver's license and be insurable by The Company's insurance carrier. Any employee whose license is under restriction or suspension must inform his or her supervisor.								
Some employees will be required to obtain an Iowa Class D Endorsement 2 (chauffeur's) license in order to operate some of our larger vehicles. If a potential employee has a disability that prevents her or him from maintaining a license, Forever Green may grant an exception. Additionally, any employee who works in a position in which driving is not required may be granted an exception.								
Employees who will be driving Forever Green vehicles may be subject to a periodic driving record background check. All employees will be required to maintain a driving status consistent with rules provided by our insurer. Failure to do so may result in employment termination due to the inability to fulfill essential job functions.								
	FOR OFFICE U	SE ONLY -	DO NOT WRITE IN THIS SPA	CE				
Name:			Drivers License#:					
Date Hire	d:		State:Class:	Expires:				
Position:		Motor Vehicle Report on fil	Motor Vehicle Report on file? Y or N					
Employee	Classification: Full Time	Part Tin	ne Seasonal Seasonal Ful	l Time On Call				
Wage: Hourly			Notes:					
Season:	Winter Summer		,					
	15							
Interview	ad Ru:							