

**Pate Landscape Company
Employment Application**

TODAY'S DATE: _____

DATE YOU ARE AVAILABLE TO START WORK: _____

FULL NAME: _____

PRESENT ADDRESS: _____

PHONE/CELL: _____

NAME OF HIGH SCHOOL _____

DID YOU GRADUATE OR EARN GED? _____ DATE OF GRADUATION: _____

TRADE SCHOOL & YEAR GRADUATED _____

COLLEGE & YEAR GRADUATED _____

MILITARY SERVICE/YEARS _____

DO YOU HAVE A DRIVERS LICENSE? _____ ID CARD? _____ LICENSE # _____

CAN YOU WORK ON SATURDAYS WHEN NECESSARY? _____

DO YOU HAVE EXISTING PHYSICAL CONDITIONS THAT PREVENT YOU FROM PERFORMING MANUAL LABOR?
(IF YES, PLEASE EXPLAIN)

EMPLOYMENT RECORD:

PLEASE LIST INFORMATION REGARDING YOUR LAST TWO (2) EMPLOYERS:

*NAME OF EMPLOYER: _____

DATE OF EMPLOYMENT: START _____ FINISH _____

WAGE _____ SUPERVISOR _____

POSITION _____ REASON FOR LEAVING _____

*NAME OF EMPLOYER: _____

DATE OF EMPLOYMENT: START _____ FINISH _____

WAGE _____ SUPERVISOR _____

POSITION _____ REASON FOR LEAVING _____

PERSON TO CONTACT IN CASE OF EMERGENCY:

NAME: _____

PHONE: _____

PLEASE NOTE PATE LANDSCAPE COMPANY HAS A COMPANY POLICY THAT INCLUDES A SUBSTANCE ABUSE POLICY AS WELL AS A CONFIDENTIALITY & NON-COMPETE AGREEMENT.

PLEASE SIGN AND DATE ACKNOWLEDGING THAT ALL INFORMATION GIVEN ON THIS APPLICATION IS TRUE TO THE BEST OF YOUR KNOWLEDGE:

NAME: _____ DATE: _____

IS THERE ANY ADDITIONAL INFORMATION YOU WOULD LIKE TO INCLUDE ON THIS APPLICATION:

FOR INTERNAL USE ONLY:

START DATE:

HOURLY RATE:

HIRED BY:

OWNER SIGNATURE FOR APPROVAL: