

J.S. Goode Landscaping

"An Equal Opportunity Employer"

"Drug Free Work Place"

www.jsgoode.com

6795 Tarlton Road
Circleville, OH 43113

Phone: 740-474-5053
Fax: 740-474-7413

THIS SECTION TO BE COMPLETED BY EMPLOYER

Hire Date: _____ **Uniform Shirt Size:** _____
Rate of Pay: _____ **Uniform Pant Size:** _____

Application for Employment

APPLICATION DATE: _____

PERSONAL INFORMATION

NAME:		SOCIAL SECURITY #:	
ADDRESS:		APT.# / P.O. BOX:	
CITY:	STATE:	ZIP:	
HOME PHONE:	EMAIL ADDRESS:		
EMERGENCY CONTACT:		PHONE #1:	PHONE #2:
ARE YOU LEGALLY ALLOWED TO WORK IN THE U.S.A? YES _____ NO _____			
ARE YOU OVER 18 YEAR OLD? YES _____ NO _____			

DESIRED EMPLOYMENT & INFORMATION

✓ (Check your first choice)

POSITION APPLYING FOR: _____ **FULL-TIME?** _____ **PART-TIME?** _____ **TEMPORARY-SEASONAL?** _____

HAVE YOU APPLIED HERE BEFORE? Y _____ N _____ WHEN? _____

HAVE YOU WORKED HERE BEFORE? Y _____ N _____ WHEN? _____ SUPERVISOR NAME: _____

IF SO, WHAT WAS YOUR REASON FOR LEAVING? _____

ARE YOU CURRENTLY EMPLOYED? Y _____ N _____ ON LAYOFF STATUS? Y _____ N _____ SINCE WHEN? _____

SUBJECT TO RECALL? Y _____ N _____ WHEN? _____

WHAT DATE CAN YOU START WORK? _____ CAN YOU TRAVEL IF THE JOB REQUIRES IT? Y _____ N _____

HAVE YOU EVER BEEN CONVICTED OF A CRIME? _____ IF YES, EXPLAIN CONVICTION: _____

DO YOU POSSESS A VALID DRIVERS LICENSE? Y _____ N _____ A CDL LICENSE? Y _____ N _____ WHAT CLASS? _____

CAN YOU WORK: OVERTIME? _____ WEEKDAYS? _____ EVENINGS? _____ SATURDAYS? _____ SUNDAYS? _____

WHAT DAYS / TIMES **CAN'T** YOU WORK? _____

DO YOU KNOW ANYONE WHO CURRENTLY WORKS AT JS GOODE? Y _____ N _____ IF SO, WHO? _____

REFERRED BY: FRIEND _____ EMPLOYEE _____ IF SO, WHO? _____ WALK-IN _____

EMPLOYMENT AGENCY _____ SCHOOL _____ NEWSPAPER AD _____ OTHER _____

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REFERENCES - (List **Professional References** such as Supervisors, Managers, Teachers, Customers, etc.)

NAME	PHONE	COMPANY/TITLE	YEARS KNOWN

EDUCATION

High School: _____ City: _____ State: _____

College: _____ Major: _____ Years: _____ Degree: _____

Trade, Business or Other Certifications: _____

Military Service – From: _____ To _____ Branch: _____ Honorable Discharge? _____

Current Membership in Active Reserves? Yes _____ No _____ When does this expire? _____ (Mo/Yr)

SKILLS

As a Job Requirement, are you able to lift, with reasonable accommodation, 50 lbs. on a regular basis?

Yes _____ No _____

COMPUTER SKILLS

Windows Software _____ Word Processing _____ Spreadsheet _____ Other _____

OFFICE / CUSTOMER SERVICE OR SALES SKILLS (Explain or Attach Resume)

EQUIPMENT SKILLS

Chain Saws _____ BobCats _____ Dump Truck? _____ with Trailer? _____ Commercial Mowers? _____

Hand Tools, Power Tools (list): _____

LANDSCAPING SKILLS

Can you measure and use measurements effectively? _____ Read layouts and drawings? _____

If so, When/Where did you use these skills last? _____

List other landscape experience? _____ How Long? _____

Where did you learn these skills? _____ How long ago? _____

What other work related experience do you have? _____

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Work History - List the last 3 Employers below (last one first)

Employer Name:			Dates Employed		Work Performed
Address:			From	To	
City:	State:	Zip:			
Supervisor:		Phone:			
Job Position:			Hourly Rate/Salary		
Description of Business:			Starting	Final	
Reason For Leaving:					

Employer Name:			Dates Employed		Work Performed
Address:			From	To	
City:	State:	Zip:			
Supervisor:		Phone:			
Job Position:			Hourly Rate/Salary		
Description of Business:			Starting	Final	
Reason For Leaving:					

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Address:			From	To	
City:	State:	Zip:			
Supervisor:		Phone:			
Job Position:			Hourly Rate/Salary		
Description of Business:			Starting	Final	
Reason For Leaving:					

Other Experience:
