



# Employment Application

PO Box 204  
 Batavia, OH 45103  
 513-625-1400  
 513-625-2260 Fax

| APPLICANT INFORMATION   |  |                              |                             |   |   |
|---|--|------------------------------|-----------------------------|---|---|
| Last Name   |  | First                        |                             | M.I.  | Birth date  |
| Street Address  |  |                              |                             | Apartment/Unit #  |   |
| City  |  | State                        |                             | ZIP   |   |
| Phone   |  | E-mail Address               |                             |   |   |
| Date Available  |  | Social Security No.          |                             | Desired Salary  |   |
| Position Applied for <b>Lawn Care</b> <input type="checkbox"/> <b>Landscaping</b> <input type="checkbox"/> <b>Underground Utilities</b> <input type="checkbox"/> <b>Irrigation</b> <input type="checkbox"/> |  |                              |                             |   |   |
| Are you available Monday through Saturday for work?   |  | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Have you ever been convicted of felony?   Full <input type="checkbox"/> Part <input type="checkbox"/>   |   |
| Do you possess a valid Drivers License?   |  | YES <input type="checkbox"/> | NO <input type="checkbox"/> | If yes what class?  | Can you operate a standard transmission?   YES <input type="checkbox"/> NO <input type="checkbox"/> |
| Are you a citizen of the United States?   |  | YES <input type="checkbox"/> | NO <input type="checkbox"/> | If no, are you authorized to work in the US?   YES <input type="checkbox"/> NO <input type="checkbox"/> |   |

List any work experience or special skills that you have that may relate to the position for which you are applying:

| EDUCATION   |    |                   |                              |                             |        |
|-------------|----|-------------------|------------------------------|-----------------------------|--------|
| High School |    |                   | Address                      |                             |        |
| From        | To | Did you graduate? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Degree |
| College     |    |                   | Address                      |                             |        |
| From        | To | Did you graduate? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Degree |

| REFERENCES  |              |
|---|--------------|
| <i>Please list three professional references.</i> |              |
| Full Name   | Relationship |
| Company   | Phone (   )  |
| Address   |              |
| Full Name   | Relationship |
| Company   | Phone (   )  |
| Address   |              |
| Full Name   | Relationship |
| Company   | Phone (   )  |
| Address   |              |

| <b>PREVIOUS EMPLOYMENT</b>  |                    |                    |  |
|---|--------------------|--------------------|--|
| Company   |                    | Phone ( )          |  |
| Address   |                    | Supervisor         |  |
| Job Title   | Starting Salary \$ | Ending Salary \$   |  |
| Responsibilities  |                    |                    |  |
| From  | To                 | Reason for Leaving |  |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> |                    |                    |  |
| Company   |                    | Phone ( )          |  |
| Address   |                    | Supervisor         |  |
| Job Title   | Starting Salary \$ | Ending Salary \$   |  |
| Responsibilities  |                    |                    |  |
| From  | To                 | Reason for Leaving |  |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> |                    |                    |  |
| Company   |                    | Phone ( )          |  |
| Address   |                    | Supervisor         |  |
| Job Title   | Starting Salary \$ | Ending Salary \$   |  |
| Responsibilities  |                    |                    |  |
| From  | To                 | Reason for Leaving |  |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> |                    |                    |  |

If no why not?

| <b>MILITARY SERVICE</b>          |                   |
|----------------------------------|-------------------|
| Branch                           | From To           |
| Rank at Discharge                | Type of Discharge |
| If other than honorable, explain |                   |

| <b>DISCLAIMER AND SIGNATURE</b>   |      |
|---|------|
| <p>I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.</p> <p>I hereby authorize Libbee's Landscaping &amp; Grounds Management or its agents to pull a Motor Vehicle Report.</p> <p>I also understand that neither this application, nor a commitment to employment by Libbee's Landscaping &amp; Grounds Management constitutes a contract of employment. If a contract is to exist, that document will be executed in writing by Libbee's Landscaping &amp; Grounds Management. I further understand that Libbee's Landscaping &amp; Grounds Management conducts a 5 panel pre-employment drug screen, random testing, post accident testing and return to duty drug and alcohol testing as outline in our policy statement and employee handbook.</p> |      |
| Signature   | Date |