Lasting Impressions Landscaping

6 Plantation Court
Saratoga Springs, NY 12866

fx: 518.584.5259
em: lastingimpressionslandscaping@yahoo.com

APPLICANT INFORMATION

Applicant Name:

Current Address:

City, state, zip:

Home Phone:

Email Address:

How were you referred to Lasting Impressions Landscaping?

EMPLOYMENT POSITIONS

Position(s) applying for:

Are you applying for:

Temporary Work, such as summer or holiday work?	Y	N
Regular part-time work?	Y	N
Regular full-time work?	Y	N

What days and hours are you available for work?

If applying for temporary work, when will you be available?

If hired, on what date can you start working? ___ / ___ / ___

Can you work on the weekends? Y N

Can you work evenings? Y N

Are you available to work overtime? Y N

Salary desired? $ _____

PERSONAL INFORMATION

1 ▪ Have you ever applied to Lasting Impressions Landscaping before? Y N

1a ▪ If yes, please explain (include date).

2 ▪ Do you have any friends, relatives or acquaintances working for Lasting Impressions Landscaping? Y N

2a ▪ If yes, state name and relationship.

3 ▪ If hired, would you have transportation to/from work?

2 ▪ Are you over the age of 18? (If under 18, hire is subject to verification of minimum legal age.)

3 ▪ If hired, would you be able to present evidence of your U.S. citizenship or proof of your legal right to work in the United States?

Lasting Impressions Landscaping

6 Plantation Court
Saratoga Springs, NY 12866

fx: 518.584.5259
em: lastingimpressionslandscaping@yahoo.com

Personal Information cont'd

4 ▪ If hired, are you willing to submit to and pass a controlled substance test?

5 ▪ Are you able to perform the essential functions of the job, either with/without reasonable accommodation?

5a ▪ If no, describe the functions that cannot be performed:
(Note: Company complies with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. It is possible that a hire may be tested on skill/agility and may be subject to a medical examination conducted by a medical professional.)

6 ▪ Have you ever been convicted of a criminal offense (felony or misdemeanor)?

6a ▪ If yes, please describe the crime - state nature of the crime(s), when and where convicted and disposition of the case:
(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The date of the offense, the nature of the offense, including any significant details that affect the description of the event, and the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)

EDUCATION, TRAINING AND EXPERIENCE

HIGH SCHOOL

School name:

School address:

School city, state, zip:

Number of years completed:

Did you graduate? Y N

Degree / diploma earned:

COLLEGE / UNIVERSITY

School name:

School address:

School city, state, zip:

Number of years completed:

Did you graduate? Y N

Degree / diploma earned:

Lasting Impressions Landscaping

6 Plantation Court
Saratoga Springs, NY 12866

fx: 518.584.5259
em: lastingimpressionslandscaping@yahoo.com

Vocational School

Name:

Address:

City, state, zip:

Number of years completed:

Did you graduate? Y N

Degree / diploma earned:

Military

Branch:

Rank in Military:

Total Years of Service:

Skills/Duties:

Related Details:

ADDITIONAL INFORMATION

Do you speak, write or understand any foreign languages? Y N

If yes, describe which language(s) and how fluent of a speaker you consider yourself to be.

Do you have any other experience, training, qualifications or skills which you feel should be brought to our attention, in the case that they make you especially suited for working with us? Y N

If yes, please explain.

EMPLOYMENT HISTORY

Are you currently employed? Y N

If you are currently employed, may we contact your current employer? Y N

Below, please describe past and present employment positions. **Please account for all periods of unemployment.** If you have attached a resume, please note here and fill in any information not noted in the resume.

Name of Employer:

Name of Supervisor:

Lasting Impressions Landscaping

6 Plantation Court
Saratoga Springs, NY 12866

fx: 518.584.5259
em: lastingimpressionslandscaping@yahoo.com

Employment cont'd

Telephone Number:

Business Type:

Address:

City, state, zip:

Length of Employment (Include Dates):

Position & Duties:

Reason for Leaving:

May we contact this employer for references? Y N

Name of Employer:

Name of Supervisor:

Telephone Number:

Business Type:

Address:

City, state, zip:

Length of Employment (Include Dates):

Position & Duties:

Reason for Leaving:

May we contact this employer for references? Y N

Name of Employer:

Name of Supervisor:

Telephone Number:

Business Type:

Address:

City, state, zip:

Lasting Impressions
Landscaping

6 Plantation Court
Saratoga Springs, NY 12866

fx: 518.584.5259
em: lastingimpressionslandscaping@yahoo.com

Employment cont'd

Length of Employment (Include Dates):

Position & Duties:

Reason for Leaving:

May we contact this employer for references? Y N

REFERENCES

List individuals who have knowledge of your work performance within the last four years. Please include professional references only.

Name - First, Last:

Telephone Number:

Address:

City, state, zip:

Occupation:

Number of Years Acquainted:

Name - First, Last:

Telephone Number:

Address:

City, state, zip:

Occupation:

Number of Years Acquainted:

Name - First, Last:

Telephone Number:

Address:

City, state, zip:

Occupation:

Number of Years Acquainted:

Lasting Impressions
Landscaping

6 Plantation Court
Saratoga Springs, NY 12866

fx: 518.584.5259
em: lastingimpressionslandscaping@yahoo.com

PLEASE READ AND INITIAL EACH PARAGRAPH, THEN SIGN BELOW

I certify that I have not purposely withheld any information that might adversely affect my chances for hiring. I attest to the fact that the answers given by me are true & correct to the best of my knowledge and ability. I understand that any omission (including any misstatement) of material fact on this application or on any document used to secure can be grounds for rejection of application or, if I am employed by this company, terms for my immediate expulsion from the company.

_____

I understand that if I am employed, my employment is not definite and can be terminated at any time either with or without prior notice, and by either me or the company.

_____

I permit the company to examine my references, record of employment, education record, and any other information I have provided. I authorize the references I have listed to disclose any information related to my work record and my professional experiences with them, without giving me prior notice of such disclosure. In addition, I release the company, my former employers & all other persons, corporations, partnerships & associations from any & all claims, demands or liabilities arising out of or in any way related to such examination or revelation.

_____

Applicant's Signature:

Date: