

BOCKELMANS LANDSCAPING AND GARDEN CENTER

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

Today's Date_____

Name_____Phone_____

Address_____City_____State____Zip_____

Birthdate_____Social Security Number_____

Do you hold a valid driver's license? _____License No._____State Issued_____

Commercial Driver's License? _____Class_____How many years? _____

Do you have an up to date medical card for CDL License? _____

U.S. Citizen Yes_____No_____

Marital Status_____No. of Dependents_____Do you pay child support_____

PHYSICAL RECORD

Do you have any physical inadequacies that preclude you from performing any work for which you are being considered?

Do you have any allergies, history of heart problems, high blood pressure, or diabetes, etc?

Do you have any previous injuries? If yes, please explain:

Do you take any medications? If yes, please name the medication and the reason for it:

Emergency Contact Person_____Relationship_____

Phone Number_____Cell Number_____

GENERAL

DAYS AND TIMES AVAILABLE FOR WORK (please insert available time for each day)

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Hourly Wage Expectation _____ When would you be available to start? _____

Are you employed now? _____ May we contact your present employer? _____

Does your present employer know of your plans to change employment? _____

Why do you desire to make a change? _____

Have you ever held a position of trust (handling money or confidential material)? _____

Rate your knowledge in each of the following categories.

(1-No Knowledge, 2-Basic Knowledge, 3 Hobbyist/Moderate Knowledge, 4-Expert Knowledge)

Annuals____ Perennials____ Trees/Shrubs____ Pruning____ Mulching____ Edging Beds____
Installation of New Lawns____ Installation of brick, block____ Building Decks____ Concrete____
Water Gardens____ Installation of drain lines____ Landscape Design____ Landscape Installation____
Use of Skid Loader____ Filling Propane____

Have you ever driven oversized vehicles? If yes, types:

Can you back up a trailer?

Have you ever operated machinery? If yes, types?

Summarize special skills and qualifications from employment or other experience: _____

On a scale of 1(low score) to 10 (high score) how would you rate yourself?

Self-Motivation _____ Leadership _____ Responsibility _____ Dependable _____ Honesty _____

EDUCATION	Name/Location of school	# of Yrs.	Graduate Year	Subjects studied
		Attended	or GED	
High School				
College				
Trade, Business or Other				

U.S. Military Service: _____ Rank: _____ Present membership in National
Guard or Reserves: _____

EMPLOYMENT HISTORY STARTING WITH THE MOST RECENT:

Employer Name _____ Phone Number _____ Fax _____
Address _____ Supervisor's Name _____
City/State/Zip _____ Rate of Pay _____ Position _____
Dates Employed _____ Are you eligible for rehire? _____
Reason for Leaving _____

Employer Name _____ Phone Number _____ Fax _____
Address _____ Supervisor's Name _____
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Employer Name _____ Phone Number _____ Fax _____
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Have you ever been convicted of any kind of felony? _____ are there any pending charges against you involving a criminal offense? _____
(Answering "yes" is not an automatic disqualification of employment.)
If yes, please explain _____

Have you had any accidents or driving violations within the past 5 years? _____ If yes, please explain _____

I understand that any verbal or written statement that is false, fraudulent or misleading that is contained in this application or attached materials, or in the course of any related employment process, whether made by me or by others at my request, will result in rejection of my application, denial of employment or dismissal from service if discovered after employment and under some circumstances, may result in prosecution for a crime.

I certify that all statements contained herein are true and complete whether made by me or others at my request.

I authorize Bockelmans Landscaping, Inc. to check employment references and verify education information provided on this employment application and as disclosed in the interview process.

I authorize Bockelmans Landscaping, Inc. to check my driving record if the position for which I am applying requires driving.

I understand I may be asked to submit to a pre-employment drug test and /or criminal history background check as a condition of employment.

I release Bockelmans Landscaping, Inc. and all providers of information from any liability as a result of furnishing and receiving any information related to the Bockelmans Landscaping, Inc hiring process. By submitting my application materials, I agree to the conditions stated in this "Certification and Signature" section.

I understand that if my application is accepted, that employment with this company at all times is employment "at will". It is further understood that this "at will" relationship may not be changed by any written document, verbal statements, or by conduct unless such change is specifically acknowledged by an authorized executive of the company and includes no guarantee, contract, or promise of employment for any specific length of time.

Signature of Applicant_____ Date_____

BOCKELMANS LANDSCAPING, INC.

2869 Youngstown Kingsville Rd Cortland, OH 44410

mbockelman@neo.rr.com

Phone 330-638-5296 Fax 330-638-2520

REQUEST FOR CHECK OF DRIVING RECORD

I hereby authorize you to release the following information to Bockelman's Landscaping, Inc for purposes of investigation as required by Sections 391.23 and 391.25 of the Federal Motor Carrier Safety Regulations. You are released from any and all liability which may result from furnishing such information

Applicant Signature

Date

Name of Applicant_____

Address_____

Date of Birth_____ Soc Sec #_____

License Number_____ Issuing State_____

I also herby certify that this report request and the above applicant's release notice meet the definition of "permissible uses" of state motor vehicle records under the provisions of the Driver's Privacy Protection Act of 1994 (Public Law 103-322 Title XXX Sections 300002 (a))

Requestor Signature

Date