

Notice to all applicants: Please answer each question and section completely. Supplying incomplete, false, or misleading information would be cause for rejection of this application or immediate dismissal or termination of employment.

APPLICANT NAME \_\_\_\_\_ DATE \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_  
 POSITION SOUGHT \_\_\_\_\_ ALT. PHONE \_\_\_\_\_  
 SEEKING  FULL TIME  PART TIME  1<sup>ST</sup> SHIFT  2<sup>ND</sup> SHIFT  3<sup>RD</sup> SHIFT  ANY SHIFT  WEEK ENDS (optional) SOC. SEC \_\_\_\_\_

EDUCATION: School name and location	ATTENDANCE DATES Mo./Yr. to Mo./Yr.	GRADUATION Yes/No	LIST MAJOR, GPA, & DEGREES
HIGH SCHOOL			
TRADE/BUSINESS/COLLEGE			
COLLEGE/UNIVERSITY			

List other education, experience, skills, or qualifications which you feel would especially fit you for this position, and identify other considerations which may impact your availability to work (scheduling conflicts, school, etc.):

Have you ever been convicted of a criminal offense?  Yes  No  
 If so, explain in the space provided. (Conviction will not automatically exclude you from employment consideration.)

Have you ever received disciplinary suspension or been discharged or forced to resign from any position?  Yes  No  
 If so, explain in the space provided.

Have you ever worked for Cedar Valley Lawn Care before?  Yes  No  
 If so, explain in the space provided.

List three business references who can provide information regarding skills/abilities. If not applicable, list personal references (not relatives).

NAME	TITLE/BUSINESS	PHONE NUMBER	YEARS KNOWN

If you have worked under other names, please indicate: \_\_\_\_\_

Federal law requires you to provide proof of identity and employment eligibility. Are you a citizen of the United States?  Yes  No  
 If not, are you able to provide evidence of identity and employment eligibility?

# Cedar Valley Lawn Care

List your recent employment first:

EMPLOYER \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
SUPERVISOR'S NAME \_\_\_\_\_  
EMPLOYER PHONE NUMBER \_\_\_\_\_

JOB TITLE \_\_\_\_\_  
DATES Mo. \_\_\_\_ Yr. \_\_\_\_ to Mo. \_\_\_\_ Yr. \_\_\_\_  
SALARY: BEGINNING \_\_\_\_\_ FINISH \_\_\_\_\_  
REASON FOR LEAVING \_\_\_\_\_

Briefly describe the nature and duties of your position: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

EMPLOYER \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
SUPERVISOR'S NAME \_\_\_\_\_  
EMPLOYER PHONE NUMBER \_\_\_\_\_

JOB TITLE \_\_\_\_\_  
DATES Mo. \_\_\_\_ Yr. \_\_\_\_ to Mo. \_\_\_\_ Yr. \_\_\_\_  
SALARY: BEGINNING \_\_\_\_\_ FINISH \_\_\_\_\_  
REASON FOR LEAVING \_\_\_\_\_

Briefly describe the nature and duties of your position: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

EMPLOYER \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
SUPERVISOR'S NAME \_\_\_\_\_  
EMPLOYER PHONE NUMBER \_\_\_\_\_

JOB TITLE \_\_\_\_\_  
DATES Mo. \_\_\_\_ Yr. \_\_\_\_ to Mo. \_\_\_\_ Yr. \_\_\_\_  
SALARY: BEGINNING \_\_\_\_\_ FINISH \_\_\_\_\_  
REASON FOR LEAVING \_\_\_\_\_

Briefly describe the nature and duties of your position: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

EMPLOYER \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
SUPERVISOR'S NAME \_\_\_\_\_  
EMPLOYER PHONE NUMBER \_\_\_\_\_

JOB TITLE \_\_\_\_\_  
DATES Mo. \_\_\_\_ Yr. \_\_\_\_ to Mo. \_\_\_\_ Yr. \_\_\_\_  
SALARY: BEGINNING \_\_\_\_\_ FINISH \_\_\_\_\_  
REASON FOR LEAVING \_\_\_\_\_

Briefly describe the nature and duties of your position: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

I, the undersigned, certify the information provided herein is true and complete to the best of my knowledge. Should any statement I have made in this application prove to be false, misleading, or erroneous, it may result in the rejection of my application or discharge from employment. I further understand this application becomes the property of Cedar Valley Lawn Care and will not be returned. I hereby authorize and consent to a full background investigation (within 45 days) regarding my education, employment, criminal history, if any, and authorize references and/or other persons to provide information they may have concerning my character, health, and employment record. I hereby unconditionally release any named or unnamed informant from any and all liability resulting from furnishing information. Should I be selected for employment, I understand I have the right to request reasonable accommodation. Requests for accommodation may be either verbal or written, made to the hiring authority. I also understand this application is not a contract of employment. Any offer of employment is contingent upon satisfactorily passing any required physical examination. Equal Opportunity Employer.

DATE \_\_\_\_\_

APPLICANT SIGNATURE \_\_\_\_\_



Name \_\_\_\_\_ Date \_\_\_\_\_

All phone numbers where you can be reached: (Very Important!)

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Please circle the number that best describes your experience.

- 1 - Lots of experience (Describe experience)
- 2 - Some experience
- 3 - No experience, but interested in learning
- 4 - No experience

I have experience operating . . .

-	Push mowers	1	2	3	4
-	Walk behind mower	1	2	3	4
-	Z-Trak mowers	1	2	3	4
-	Weed eaters	1	2	3	4
-	Leaf blowers	1	2	3	4
-	Skid loader	1	2	3	4
-	Ram Rods	1	2	3	4
-	Ditch Witch	1	2	3	4
-	Sod knives	1	2	3	4
-	End loader	1	2	3	4
-	Sod roller	1	2	3	4
-	Broadcast seeder	1	2	3	4
-	Hydro seeder	1	2	3	4
-	Ryan aerator	1	2	3	4
-	Power edger	1	2	3	4
-	Truck with snow plow	1	2	3	4

I have experience repairing the following:

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- 
-

**Please indicate the crew you are most interested in working on and thoroughly explain why.**

**Mow & Trim      Weed & Feed\* (licensed chemical applicators only)**

**Dirt (finish grade, sod installation)      Irrigation systems**

**Retaining walls**

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**\*List 3 things important in promoting teamwork**

**\*List 3 things damaging to teamwork**

**\*List 3 things important to efficiency**

**\*List 3 things damaging to efficiency**

**Please use the back page to give us any additional information that may be useful to us.**