#### **Employment Application**

Created: 02/09/2004

Please note: At this time, you will have to copy and paste this application into Word. You will then be able to fill out the form and e-mail it to us. To e-mail, go to "file", then "send to" and then choose "mail recipient" and insert this e-mail address: <u>bookkeeping@vanattas.com</u>. You may also fax it to us at 517-339-0172 or mail it to us at: Van Attas, 9008 Old M-78, Haslett, MI 48840. Thank you for applying!

# **Application for At-Will Employment**

## Van Atta's Greenhouse & Flower Shop

We consider applicants for all position without regard to race, color, religion, creed, gender, national origin, age disability, marital or veteran status or any other legally protected status.

Please Print

Name:

Date of Application \_\_\_/\_\_/\_\_\_

Position(s) applied for:

Department(s) preferred/experienced in: \_\_\_\_ Nursery (trees & shrubs)

\_\_\_\_ Perennials \_\_\_\_Sales \_\_\_\_ Flower shop \_\_\_\_ Tropicals \_\_\_\_ Any

Date you can start:\_\_\_/\_\_/

Present Address:

Permanent Address (if different):

Your Telephone number: Home: Work:

Are you 18 years or older \_\_\_\_\_Yes \_\_\_\_\_No

Available for work \_\_\_/\_\_/ What is your desired salary range? \_\_\_\_\_

Are you available to work \_\_\_\_\_ Full Time \_\_\_\_\_ Part Time

Are there any hours or days that you cannot work: \_\_\_\_\_ If so, when:

Are you employed now? \_\_\_\_\_ May we contact your present employer? \_\_\_\_\_

Have you ever apply to this Company before? \_\_\_\_\_ When? \_\_\_\_\_

## Education

Name & Address of School	Course of Study	Years	Graduate?
High School			
College			
Other			
Are you lawfully entitled to be employed	d in the United States?		
Have you ever been convicted of a crime	e except a minor traffi	c violation?	
If so, please state citation, date and place	e where offense occur	red:	

Please provide any additional information such as special skills, training, management experience, equipment operation or qualifications you feel will be helpful to us in considering your application:

#### References

Three individuals Not related t	to you, whom you have k	now for at lease one year:	
Name, Address & Telephone	Relationship	Years Acquainted	
Emergency Contact:			
Streat City/State Dhone			Name
Street City/State Phone			
Current & Former Em	ployers: (Most Recent	: One First)	
Date From: Date To:			
Company Name, Address & Pho	one Number		
Salary	Last Position Held		
Responsibilities	Reason for Leaving		
Date From: Date To:			

Company Name, Address & Phone Number

Salary

Last Position Held

Responsibilities

Reason for Leaving

Date From: Date To:

Company Name, Address & Phone Number

Salary

Last Position Held

Responsibilities

Reason for Leaving

May we contact the Employers Listed?

If not, which one(s)\_\_\_\_\_

Please read the following statement carefully before signing to indicate your understanding:

I understand that, prior to being offered employment, I may be requested to take an employment examination. In the event that I have a disability that will affect my ability to take the test. I will so inform Van Atta?s Greenhouse prior to the administration of the test so that a reasonable accommodation can be made. Van Atta?s reserves the right to require medical documentation regarding the need for accommodation.

I certify that the facts contained in this application are true and complete to the best of my knowledge and I understand that, if employed, falsified statements on this application may result in termination.

I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated with or without cause, at any time, with or without notice.

I authorize investigation of all statements contained in this application for any employment-related purpose. I release the listed references and all employers, except those specifically excepted,\* to provide you with any and all applicable information the may have. I hereby release these references and former employers from all liability for any information they may give to you.

\_\_\_\_\_ Date \_\_\_\_\_ Signature

Please fill out and bring in to Van Atta's or mail to: Van Atta's Greenhouse & Flower Shop, 9008 Old M-78, Haslett, MI 48840 517-339-1142

Or Copy and email to bookkeeping@vanattas.com

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