

☻ Employment Application ☻

A bright future...



A place where you can grow.

Employment Questionnaire

This company is an equal opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability.

Date of Application: _____ Phone Number _____

Full Name _____ Email: _____

Full Address _____
Last First Middle

Prior address if less than 5 years _____

I am applying for a position as: _____

If full time employment is not available, would you accept part-time? Yes _____ No _____

Are you 18 years of age or older? Yes _____ No _____ If no, please state age: _____

Education

<u>Name</u>	<u>City/State</u>	<u>Grade Average</u>	<u>Yrs Attended</u>	<u>Certificate or Diploma</u>
High School _____				
College _____				
Business or Trade School _____				
Other Training or Education _____				

General Information

Will you travel? Yes _____ No _____ Ever Bonded? Yes _____ No _____ If yes, when and by whom _____

Have you ever been convicted of a felony? Yes _____ No _____ If yes, explain number of convictions, nature of offenses leading to convictions, how recently such offenses were committed, sentences imposed, and types of rehabilitation. _____

Are you a US Citizen? Yes _____ No _____ If not a US Citizen, are you a non-citizen with a Visa? Yes _____ No _____

Have you previously filed an application with the company? Yes _____ No _____ If yes, what year? _____

Were you ever employed at this company? Yes _____ No _____ If yes, please state when and what department _____

Date available to start work? _____

Will you be available for mandatory training before starting employment? Yes _____ No _____

Do you have any relatives now employed at this company? Yes _____ No _____

If so, names & relationships _____

Do you have any friends now employed at this company? Yes _____ No _____

If so, names: _____

Emergency contact name and number _____

Experience

1.) Current or Last Employer _____ Position held _____

Address _____ Supervisor: _____

Dates of employment: Start: _____ End: _____ Wage / Salary: _____

Major Duties: _____

Reason for Leaving: _____

2.) Current or Last Employer _____ Position held _____

Address _____ Supervisor: _____

Dates of employment: Start: _____ End: _____ Wage / Salary: _____

Major Duties: _____

Reason for Leaving: _____

3.) Current or Last Employer _____ Position held _____

Address _____ Supervisor: _____

Dates of employment: Start: _____ End: _____ Wage / Salary: _____

Major Duties: _____

Reason for Leaving: _____

Additional Information

I was referred by: _____

Work performed on a volunteer basis: _____

Have you ever been discharged by an employer? Yes _____ No _____ If yes, please explain: _____

Briefly state why you want to work for this company: _____

Personal References

Do not use former employers or relatives.

Full Name _____ Occupation _____

Address _____ Phone # _____

Full Name _____ Occupation _____

Address _____ Phone # _____

Essential Job Functions

Our retail operation has several different types of positions. Each type has essential job functions listed below. Please respond to the questions listed under the type(s) of job(s) for which you are applying. You may apply for and be interviewed for more than one type of job.

GARDEN CENTER

1. Can you walk and stand on the job for extended periods of time – possibly up to 10 hours? Yes_____ No_____
2. Can you consistently lift items that weigh up to 80 pounds? Yes_____ No_____
3. Can you frequently bend, squat, reach, lift, carry, push, and pull which will be necessary when unloading trucks or stocking merchandise items? Yes_____ No_____
4. Can you work around products such as lawn chemicals, paints, solvents, pool chemicals, chemical cleaners and thinners? Yes_____ No_____
5. Do you have previous experience selling or dealing with people in sales-related situations? Yes_____ No_____
6. Are you able to work Saturdays, Sundays, and evenings? Yes_____ No_____

WAREHOUSE/OUTSIDE YARD/DELIVERY POSITIONS

1. Can you consistently lift items weighing up to 80 pounds? Yes_____ No_____
2. Have you ever operated motorized equipment such as forklifts, front end loaders? Yes_____ No_____
3. Do you have a valid driver's license? Yes_____ No_____
4. Can you frequently bend, squat, reach, lift, carry, push, and pull which will be necessary when loading or unloading trucks and stocking merchandise? Yes_____ No_____
5. Are you able to work Saturdays, Sundays, and evenings? Yes_____ No_____
6. Can you work handling lawn chemicals, solvents, and cleaning chemicals? Yes_____ No_____

CUSTOMER SERVICE / OFFICE

1. Can you consistently lift items weighing up to 80 pounds? Yes_____ No_____
2. Do you have experience in handling payroll, accounts payable, accounts receivable, or general ledger on a manual or computerized system? Yes_____ No_____
3. Do you have experience working a cash register or handling cash transactions? Yes_____ No_____
4. Have you ever been required to make cash bank deposits for a business? Yes_____ No_____
5. Are you able to work Saturdays, Sundays, and evenings? Yes_____ No_____

Please add any comments or additional information you feel is applicable.

Did you complete this application yourself? Yes_____ No_____ If not, who did? _____

The information given on the application is true and correct to the best of my knowledge. I authorize this company to investigate all statements on this application. Falsification or elimination of information on this application is cause for dismissal at any time if employed.

I understand that my employment with Gertens shall be probationary for a period of ninety (90) days, and further that at any time during the probationary period or thereafter, my employment relation with Gertens is terminable at will for any reason by either party.

I also understand that any job offers could be contingent on my passing a drug screening test if that is company policy for all job offers.

I understand that this company is legally permitted to require a physical examination as a condition of employment once a job offer has been made. I certify that my responses above are true and correct and that I know of no limitations which would prevent me from performing the essential job functions.

Applicant Signature _____ Date _____