

E. 12202 Thorpe Road
Spokane Valley, WA 99206



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#HAASELI042R6

APPLICATION FOR EMPLOYMENT

NOTE: This application form was designed for use by persons applying for various types of positions. Some questions may not be completely applicable to your situation, but we ask that you answer all job-related inquiries to the best of your ability

SECTION 1 - GENERAL INFORMATION

(Please Print)

Name: _____
Last First Middle

Address: _____
Street, City, State, and Zip Code

Telephone: (Check Which Preferred) _____ Date of Birth: _____

Home: _____ Social Security Number: _____

Mobile: _____ Drivers License Number: _____

Are you either a U.S. Citizen or an alien authorized to work in the United States? Yes No

Position Desired: _____ Full Time Part Time

Date Available: _____ Salary/Compensation Desired: _____

Have you ever applied for a position with us? Yes No If Yes, when? _____

Have you ever been employed by Haase Landscape Inc? Yes No If Yes, when? _____

SECTION 2 - EDUCATION

High School College Graduate

Indicate last complete year of school in each category:

Name and location of last high school attended: _____

College/Business School Name and Location: _____

SECTION 3 - EMPLOYMENT HISTORY

In the following section spaces, give a complete record of your employment. Include military experience as a job. Begin with your most recent employment and work back. If additional space is needed, attach a supplementary sheet.

EMPLOYER:	DATES EMPLOYED		STARTING POSITION:
ADDRESS:	FROM _____	MO/YR	FINAL POSITION:
CITY, STATE, ZIP	TO _____	MO/YR	OTHER POSITIONS:
TELEPHONE:	IMMEDIATE SUPERVISOR:		
STARTING SALARY:	FINAL SALARY:	MAY WE CONTACT FOR REFERENCE: <input type="checkbox"/> Yes <input type="checkbox"/> No	
DUTIES:			
REASON FOR LEAVING:			

EMPLOYER:	DATES EMPLOYED		STARTING POSITION:
ADDRESS:	FROM _____	MO/YR	FINAL POSITION:
CITY, STATE, ZIP	TO _____	MO/YR	OTHER POSITIONS:
TELEPHONE:	IMMEDIATE SUPERVISOR:		
STARTING SALARY:	FINAL SALARY:	MAY WE CONTACT FOR REFERENCE: <input type="checkbox"/> Yes <input type="checkbox"/> No	
DUTIES:			
REASON FOR LEAVING:			

EMPLOYER:	DATES EMPLOYED		STARTING POSITION:
ADDRESS:	FROM _____	MO/YR	FINAL POSITION:
CITY, STATE, ZIP	TO _____	MO/YR	OTHER POSITIONS:
TELEPHONE:	IMMEDIATE SUPERVISOR:		
STARTING SALARY:	FINAL SALARY:	MAY WE CONTACT FOR REFERENCE: <input type="checkbox"/> Yes <input type="checkbox"/> No	
DUTIES:			
REASON FOR LEAVING:			

EMPLOYER:	DATES EMPLOYED		STARTING POSITION:
ADDRESS:	FROM _____	MO/YR	FINAL POSITION:
CITY, STATE, ZIP	TO _____	MO/YR	OTHER POSITIONS:
TELEPHONE:	IMMEDIATE SUPERVISOR:		
STARTING SALARY:	FINAL SALARY:	MAY WE CONTACT FOR REFERENCE: <input type="checkbox"/> Yes <input type="checkbox"/> No	
DUTIES:			
REASON FOR LEAVING:			

EMPLOYER:	DATES EMPLOYED		STARTING POSITION:
ADDRESS:	FROM _____	MO/YR	FINAL POSITION:
CITY, STATE, ZIP	TO _____	MO/YR	OTHER POSITIONS:
TELEPHONE:	IMMEDIATE SUPERVISOR:		
STARTING SALARY:	FINAL SALARY:	MAY WE CONTACT FOR REFERENCE: <input type="checkbox"/> Yes <input type="checkbox"/> No	
DUTIES:			
REASON FOR LEAVING:			

In order to permit a check of your work and education records, should we be made aware of any change of name or assumed name that you previously used? Yes No

If yes, identify names(s) and relevant dates: _____

SECTION 4 - OTHER QUALIFICATIONS

(In responding to this inquiry, continue on a separate sheet if you require additional space)

1. Describe and other special job related skills or qualifications (e.g., foreign languages, computers, etc.) that would support your applications.

SECTION 5 - REFERENCES

Name two people who know you personally (exclude relatives and previous employers).

Name	Occupation	Year Known

SECTION 6 - OTHER INFORMATION

1. Have you ever been convicted for a felony within the last seven years? Yes No

(An affirmative response will not automatically disqualify you from being considered as a candidate for employment. Factors such as age and time of the offence, seriousness and nature of the violation, and rehabilitation will be taken into account.)

If yes, please explain: _____

2. Which shifts are you available to work?

- | | | |
|-----------|------------------------------|-----------------------------|
| Days | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Evenings | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Graveyard | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Saturday | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Sunday | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

3. Are you willing to work overtime if requested? Yes No

4. Are you willing to comply with Haase Landscape, Inc. policy standards regarding appearance and grooming?

Yes No



APPLICANT'S STATEMENT



I hereby affirm that the information provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge. I also agree that any falsified information or significant omissions may disqualify me from further consideration for employment, and may result in my dismissal if discovered at a later date and time.

authorize a thorough investigation of my past employment, activities, general character, agree to cooperate in such investigations, and release from all liability or responsibility all person and corporations requesting or supplying such information. I further agree to authorize any physician or hospital to release any information which may be necessary to determine my ability to perform the job for which I am being considered or any future job in the event that I am hired.

I understand that according to the immigration reform and control act of 1986 all individuals who are hired must, as a condition of employment, produce certain documentation to verify their identity and legal authorization to work in the U.S. As a consequence, I understand that any offer of employment is contingent on my ability to produce the required documentation within the time period required by law.

I understand that my employment is terminable-at-will, that I am not being employed for any specific time, that this application is not a contract, nor is it intended to be a contract for continuing employment, and that either the employer or I may terminate my employment at any time with or without cause or notice.

Applications may be kept on file for up to six months. The employer, however, makes no representation that the application will be reviewed for any other position that the original opening for which the applicant has applied. If the applicant wants to be considered for a different position or opening, he or she should contact the employer directly.

X _____
Signature of Applicant

Date of Signature

The undersigned applicant authorizes all former employers to provide complete employment reference and to disclose and information regarding my past employment, including but not limited to my attendance, attitude, potential, and overall performance with said employer. I hereby release any previous employer, and this prospective employer, with whom I have made an application for employment, from any claims and liabilities either arising from the request for, or release of such employment information.

X _____
Signature of Applicant

Date of Signature