EMPLOYMENT APPLICATION

	PERSONAL DATA	
Date:	Home: ()	Cell: ()
Name:		
Last Name	First Name	Middle Name
Mailing Address:		
Street		City, State Zip Code
Email Address:		· · · · · · · · · · · · · · · · · · ·
1. Are you a US Citizen: \Box YES	JNO If NO, do you have a re	egistration card or a valid US
work permit? Yes No		
2. Are you over 18 and less than 7		
3. How did you learn about us? □		
□ RELATIVE □ WALK-IN □ OTHE	IR JOB INFORMATION	
1. Position preferred: LANDSCAF		
2. Type of employment? \Box FULL T		
3. Minimum pay required? \$		
4. Are you currently employed? □`		
5. Have you ever worked for Kauai	i Nursery & Landscaping. Inc	.? \Box Yes \Box No If Yes.
When? What Post		
6. Are you willing to travel off island		C
7. Do you have a valid driver's licer	nse? 🛛 YES 🗆 NO Type:	
8. Do you have transportation to a	and from Puhi daily? 🗆 YES 🛛	∃No
9. What type of equipment can you	u operate? 🗆 MOWER 🛛 AG 7	RACTOR D BOBCAT
BACKHOE LOADER CRA	NE 🛛 FORKLIFT 🗆 OTHERS: _	
10. Do you hold equipment lic	ense/certification?	NE 🗆 CRANE 🗆 FORKLIFT
		· · · · ·
11. What relevant experience do		
carpentry, masonry, electrical	, plumbing, mechanical, weld	ling, sales, etc.)
	dge or abilities, which suppor	
position which you, are seeking	?	
	MILITARY SERVICE	
1. Have you ever served in the U		NO. If YES, what Branch?
	d? From	
2. Honors or Awards?		
3. Special Training?		

EDUCATION					
	SCHOOL & ADDRESS	DATE	MAJOR	DEGREE	
		GRADUATED	MINOR		
HIGH SCHOOL					
COLLEGE					
BUSINESS					
TECHNICAL					

EMPLOYMENT EXPERIENCE

PREVIOUS EMPLOYER	ADDRESS	TELEPHONE	YRS	POSITION	

REFERENCES (DO NOT LIST RELATIVES)

				YRS
NAME	OCCUPATION	ADDRESS	TELEPHONE	KNOWN

STATEMENT AND SIGNATURE

In completing and submitting this application I understand and agree: That any misstatement of facts will be sufficient reason for immediate withdrawal of this application or, in the event of employment, is cause for termination. That my previous employers may be asked for information concerning my employment, character, ability and experience. I agree to abide by all rules and regulations set forth by Kauai Nursery & Landscaping, Inc. Applicant's Signature: ______ Date: ______ Date: ______ Date: ______ Person to notify in case of emergency? ______ Phone: _____ Phone: ______ Phone: _______ Phone: ______ Phone: ______ Phone: ______ Phone: ______ Phone:

Person to notify in case of emergency? ______ Relationship to you? _____

DO NOT WRITE BELOW THIS BOX - OFFICE USE ONLY

Interviewed by?		_ Interviewed on:		_ Position:	
Department?			Start on:	R	ate of Pay? \$
_	Excellent	Very Good	Satisfactory	Marginal	Unsatisfactory
Appearance	[]	[]	[]	[]	[]
Expression	[]	[]	[]	[]	[]
Motivation	[]	[]	[]	[]	<u>[]</u>
Personality	[]	[]	[]	[]	[]
Overall Rating	[]	[]	[]	[]	[]
Notes:					

Items to ask or check out by interviewer?