

## **APPLICATION FOR EMPLOYMENT**

## **PERSONAL DATA:** NAME\_\_\_\_\_\_ DATE\_\_\_\_ ADDRESS CITY/STATE/ZIP PHONE SOCIAL SECURITY NUMBER POSITION DESIRED (SPECIFY FULL, PART TIME, SUMMER) EDUCATION (Please specify ag related classes): MIDDLE SCHOOL: HIGH SCHOOL: \_\_\_ COLLEGE: \_\_\_\_ EMPLOYMENT HISTORY (LIST AT LEAST TWO); INCLUDE COMPANY NAME, ADDRESS, POSITION, DUTIES, LENGTH OF EMPLOYMENT, BEGINNING & ENDING SALARY. IF NO PRIOR WORK EXPERIENCE. PLEASE LIST PERSONAL REFERENCES. 1) \_\_\_\_\_ 2) INTERESTS & HOBBIES: DO PLAN TO ATTEND COLLEGE? Y / N IF SO, WHERE AND WHEN? DO YOU PLAN TO WORK FULL TIME AFTER HIGH SCHOOL GRADUATION? CAREER GOALS:

DO YOU HAVE AN	IY ALLERGIES (IF YES PLEASE EXPLA	IN)?		
DO YOU WEAR GI	LASSES OR CONTACTS?			
DESCRIBE YOUR	PHYSICAL CONDITION:			
DO YOU HAVE A DRIVER'S LICENSE IN GOOD STANDING?				
REPORT AND THE IF NO, PLEASE EX		N THE AWARD OF A POSITION?		
	BEEN CONVICTED OF A FELONY IN T			
HOW DO YOU HO SERVICE ?	PE TO BENEFIT YOURSELF AS AN EM	PLOYEE OF BONIN'S LAWN		
HOW WILL BONIN WITH THE COMPA	J'S LAWN SERVICE BENEFIT/PROFIT E ANY?	BY AWARDING YOU A POSITION		
HAVE YOU EVER	BEEN INJURED ON THE JOB?			
	RECEIVED WORKMAN'S COMPENSAT			
COMMENTS: (OFF	TICE USE ONLY)			
LIST THREE REFE	RENCES (NOT RELATED TO YOU) ANI	D INCLUDE ADDRESS AND PHONE #		
1. NAME:	ADDRESS:	PHONE:		
2. NAME:	ADDRESS:	PHONE:		
3. NAME:	ADDRESS:	PHONE:		

16'		AREA OF RECTANGLE:	
	30'	1	
25'	25'	AREA OF TRIANGLE:	
A.M.,	AND JOHNNY GO TO MRS. JO THEY COMPLETE THE JOB A RS USED ON THE JONES ACC	AND DEPART AT 9:45A.M. W	
CIRCI	LE THE PLANTS BELOW THA	T WOULD BE CLASSIFIED A	AS A GROUND COVER:
LIRIO	PPE MONDO GRASS EN	NGLISH IVY AJUGA	BAHIAGRASS
CIRCI	LE THE TURF GRASSES IN TH	HE FOLLOWING LIST:	
PAMP	PAS GRASS BERMUDAGRA	SS ST. AUGUSTINEGRASS	CENTIPEDEGRASS
	E THREE TREES NATIVE TO I		:
NAMI		BS/BUSHES THAT HAVE GRO	OWTH HEIGHTS UNDER 6' TALL: