



GREENLEAF

APPLICATION FOR EMPLOYMENT

AN EQUAL OPPORTUNITY EMPLOYER

Name: First Middle Last

Street Address

City, State, Zip Code

Phone Email Address

Position Desired

Salary Desired Date Available

Full-Time Part-Time Days & Hours Preferred

Specify any days or hours you will not be available

Are you at least 18 years old? Yes No Are you at least 21 years old? Yes No

If you have worked for GreenLeaf before, state where, when, final position, and reason for leaving.

EDUCATION AND TRAINING

School	Name/Location	Number of Years Attended	Graduated?	Major
High School				
College				
Vocational				

Which languages other than English do you speak?

Business Machines Operated

WORK EXPERIENCE

List your previous experience beginning with your most recent position.

1. Employer

Address

Phone

Starting Position

Starting Salary

Last Position

Final Salary

Dates Employed: From

To

Immediate Supervisor

Reason for Leaving

2. Employer

Address

Phone

Starting Position

Starting Salary

Last Position

Final Salary

Dates Employed: From

To

Immediate Supervisor

Reason for Leaving

3. Employer

Address

Phone

Starting Position

Starting Salary

Last Position

Final Salary

Dates Employed: From

To

Immediate Supervisor

Reason for Leaving

REFERRAL SOURCE

- Walk-In Applicant _____
- Employment Agency
Name _____
- School/College
Name _____
- Community Group
Name _____
- Employee Referral
Name _____
- Newspaper
Name _____
- Other
Specify _____

Do you have any friends or relatives currently employed by GreenLeaf? Yes No

If yes, please provide name of that person and position held at GreenLeaf?

PERMISSION TO WORK

Can you, after employment, submit verification of your legal right to work in the United States? Yes No

REFERENCES

1. Name

Address Phone Number Years Acquainted

2. Name

Address Phone Number Years Acquainted

3. Name

Address Phone Number Years Acquainted

FELONY CONVICTION RECORD

Have you been convicted of a felony within the last 5 years? (A conviction record does not disqualify you from consideration from employment) Yes No

If yes, state details and dates

PHYSICAL LIMITATIONS

Can you perform the essential functions of the job for which you are applying with or without reasonable accommodations? Yes No

If yes, what can be done to accommodate your limitation?

MILITARY SERVICE

Have you ever served in the United States Armed Forces? Yes No

Which Branch?

GOALS

Why do you want to work for GreenLeaf?

Please read the following and sign your name below.

I declare that my answers to the questions on this application are true and give GreenLeaf the right to investigate all references and information given. I agree that any false statements or misrepresentation will be cause for refusal to hire or for immediate dismissal. I understand that if I am offered a position, my employment relationship with GreenLeaf will be on an at-will basis, meaning that I or the Company may terminate the employment at any time and for any reason. I understand and agree that no one other than the President may modify or change the at-will nature of my employment relationship. Any such modification must be in writing and signed by the President of GreenLeaf and me. GreenLeaf is an equal opportunity employer, and always endeavors to select the best qualified individual for the job based upon job related qualifications, regardless of race, color, religion, age, sex, marital status, national origin, ancestry, physical or mental disability, medical condition, sexual orientation, or any other consideration made unlawful by federal, state, or local laws.

Signature

Date