



GREENLEAF

Employment Application

APPLICANT INFORMATION

Last Name		First		Today's Date	
Street Address				Apartment/Unit #	
City		State		ZIP	
Phone	()	E-mail Address			
Position Applied for and Salary/Pay Rate Desired					
Are you at least 18 years of age?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If not yet 18, can you provide a work permit if necessary?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
If hired, can you present proof of your identity and the right to work in the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If hired, would you have a reliable means of transportation?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever been discharged or asked to resign from employment?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain		
Have you ever worked for Greenleaf before?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?		
Do you have any friends or relatives who work for Greenleaf?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, list:		
Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? If not, describe the function that cannot be perform:				YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>
NOTE: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicant/employees to perform essential functions.					
What days and hours are you available to work?				<input type="checkbox"/>	<input type="checkbox"/>
Are you available to work on weekends?					
Would you be available to work overtime, if necessary?					
If hired, what date can you start work?					

PREVIOUS EMPLOYMENT

Company		Phone		
Address		Supervisor		
Job Title	Pay Rate/Salary \$	Dates employed	From:	To:
Responsibilities				
Reason for Leaving				
May we contact this employer?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	

Company		Phone		
Address		Supervisor		
Job Title	Pay Rate/Salary \$	Dates employed	From:	To:
Responsibilities				
Reason for Leaving				
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	

Company		Phone		
Address		Supervisor		
Job Title	Pay Rate/Salary\$	Dates employed	From:	To:
Responsibilities				
Reason for Leaving				
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	

EDUCATION

High School		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
From	To	Degree/Diploma		
College		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
From	To	Degree/Diploma		
Other		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
From	To	Degree/Diploma		

REFERENCES

List below three persons not related to you who have knowledge of your work performance within the last three years.

Full Name		Relationship		
Company		Phone		
Full Name		Relationship		
Company		Phone		
Full Name		Relationship		
Company		Phone		

DISCLAIMER AND SIGNATURE

Please read the following and sign your name below,

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

I hereby authorize Greenleaf (or its agents) to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to Greenleaf (or its agents) any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release Greenleaf, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

I understand and agree that if I am employed, my employment is for no definite period and may be terminated at any time, with or without prior notice, with or without cause, at the option of either myself or Greenleaf; this is called "at will" employment. I further understand that no promises or representations to the contrary are binding unless made in writing and signed by Greenleaf.

If hired, I agree to read and comply with all policies and procedures.

I certify under penalty of perjury that the information provided in this application is true and correct.

We are an Equal Opportunity Employer

Signature:

Date:

Blank area for signature and date.