



# EMPLOYMENT APPLICATION

## A Tennessee Drug-Free Workplace

This application will remain on file for a minimum of 30 days.

*Ooltewah Nursery is an equal opportunity employer. Qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, veteran status, or disability.*

### PERSONAL DATA

Application Date: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

Are you 18 years of age or older? ☐ Yes ☐ No If No, what is your date of birth? \_\_\_\_/\_\_\_\_/\_\_\_\_

Present address (street, city, state) \_\_\_\_\_

How long have you lived at this address? \_\_\_\_\_ Phone: \_\_\_\_\_

Previous address: \_\_\_\_\_

Job applied for: \_\_\_\_\_ Type of Employment: ☐ Full Time ☐ Part Time

Rate of pay expected: \$ \_\_\_\_\_ per \_\_\_\_\_ Date available to start: \_\_\_\_\_

**AVAILABILITY** List below the hours you would be available to work each week. ☐ I can work anytime

MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		SATURDAY		SUNDAY	
From	To	From	To	From	To	From	To	From	To	From	To	From	To

Have you ever worked for Ooltewah Nursery? ☐ Yes ☐ No If yes, when? \_\_\_\_\_

Have you ever previously submitted an application to work here? ☐ Yes ☐ No

Do you have any relatives or friends currently working for Ooltewah Nursery? ☐ Yes ☐ No

If yes, who? And what is their relationship to you? \_\_\_\_\_

Do you have reliable transportation to and from work? ☐ Yes ☐ No

Are you able to stand for extended periods of time? ☐ Yes ☐ No

Are you able to lift 50 lbs.? ☐ Yes ☐ No

If hired, will you be able to submit verification of your legal right to work in the U.S.? ☐ Yes ☐ No

*Ooltewah Nursery participates in E-verify.*

### LIST ALL PRESENT AND PAST EMPLOYMENT BEGINNING WITH THE MOST RECENT

Name, Address, & Phone of the company	From	To	Last position Held Title & Duties	Starting pay	Ending pay	Reason for Leaving	Supervisor Name

**PERSONAL REFERENCES** *Not former employers or relatives.*

Name and Address	Occupation	Phone Number

**EDUCATION**

Level	School Name & Address	Course of Study or Major	Years Attended	Did you graduate	Diploma or degree earned	GPA	Extracurricular Activities
High School							
College							
Other							

**BACKGROUND**

Have you ever been counseled or disciplined in a prior job for cash handling violations? ☐ Yes ☐ No

Have you ever been counseled, disciplined, or terminated in a prior job for theft, violence, discrimination, or harassment? ☐ Yes ☐ No If you answered Yes to either of the last two questions, please describe in full:

Have you ever been convicted of a felony, entered a plea of nolo to a felony charge, or been convicted of a misdemeanor? ☐ Yes ☐ No \*A Yes answer is not an automatic bar to employment. All individual circumstances may be considered.

**Special Accomplishments, Publications, Awards, etc., or anything else you would like us to consider:**

You may choose to exclude information that would reveal race, color, religion, gender, national origin, citizenship, age, disability, veteran, or other similarly protected status, if you prefer.

**APPLICANT STATEMENT AND AUTHORIZATION TO RELEASE RECORDS**

By my signature below, I certify that all information I have provided is true, complete and correct. I understand that any information provided by me that is found false, incomplete, or misrepresented in an respect, will be sufficient cause to (1) cancel further consideration of the application, or (2) immediately discharge me from the employer's service, whenever it is discovered. I expressly authorize, without reservation, Ooltewah Nursery & Landscape Co., Inc. its representative, employees, or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities, and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume, or job interview. I understand that the information supplied by me regarding my: employment history, education, credit history, criminal history, medical and professional licensing, motor vehicle record(s), residence history, and references may be utilized as part of the processing procedures. A background check may be conducted to verify the veracity of the information submitted and will be utilized to develop information concerning my character, general reputation, personal characteristics, and mode of living. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representative, for seeking gathering, and using such information in the employment process and all other personas, corporations, or organizations for furnishing such information about me. I understand that this application remains current for a minimum of 30 days. At the conclusion of that time, if I have not heard from the employer, and still wish to be considered for employment, it may be necessary to reapply and fill out a new application. If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite durations. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing assigned by the employer's president or vice-president. I also understand that, if I am hired, I will be required to pass a drug test, and to provide proof of identity and legal authority to work in the United States, and that federal immigration laws require me to complete an I-9 form in this regard. I also understand that the information I list on the I-9 form will be used to start a case in the E-Verify program whereby my information will be electronically verified with the Social Security Administration (SSA) and with the Department of Homeland Security (DHS) systems.

I certify that I have read, fully understand, and accept all terms of the foregoing Application Statement.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_