

SUPER LAWN TRUCKS APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION Complete *all* applicable information

| | | | |
|--|----------------|--|-----------|
| Name (Full - Last, First, MI) | | | |
| Position(s) applied for: | | Are you willing to work: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> Weekends <input type="checkbox"/> Evenings <input type="checkbox"/> Nights | |
| Street Address: | | City | State Zip |
| Home Phone | Business Phone | Have you previously been employed by our company? <input type="checkbox"/> Yes <input type="checkbox"/> No Where? | |
| Are you legally authorized to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No | | When could you start employment? | |
| Have you ever applied for employment with our company? <input type="checkbox"/> Yes <input type="checkbox"/> No When? | | Have you ever been convicted of a felony? <input type="checkbox"/> Yes; Explain on back. <input type="checkbox"/> No | |

EMPLOYMENT HISTORY (List below last three employers, starting with the most recent one first)

| | | | | | |
|--------------------------|---------------------|------------------------------------|------------|---------------------------------|----------|
| Present or Last Position | | Name of Company | | From Mo/Yr | To Mo/Yr |
| Street Address: | | City | | State | Zip |
| Duties: | | Reason for Leaving: | | | |
| Starting Annual Salary | Final Annual Salary | Bonus | Commission | May we contact your supervisor? | |
| Name of Supervisor | | Title and Department of Supervisor | | Phone Number of Supervisor | |
| Next Previous Position | | Name of Company | | From Mo/Yr | To Mo/Yr |
| Street Address | | City | | State | Zip |
| Duties: | | Reason for Leaving: | | | |
| Starting Annual Salary | Final Annual Salary | Bonus | Commission | | |
| Name of Supervisor | | Title and Department of Supervisor | | Phone Number of Supervisor | |
| Next Previous Position | | Name of Company | | From Mo/Yr | To Mo/Yr |
| Street Address | | City | | State | Zip |
| Duties: | | Reason for Leaving: | | | |
| Starting Annual Salary | Final Annual Salary | Bonus | Commission | | |
| Name of Supervisor | | Title and Department of Supervisor | | Phone Number of Supervisor | |

EDUCATION INFORMATION

| | | | | | | |
|--------------------|---------|------|-------|--------|------------------|-----|
| High School or GED | Address | City | State | Degree | Subjects Studied | |
| College | Address | City | State | Degree | Major | GPA |
| College | Address | City | State | Degree | Major | GPA |
| Graduate School | Address | City | State | Degree | Major | GPA |
| Other | Address | City | State | Degree | Major | GPA |

GENERAL

Additional Space (add any information you think would help us understand why you are qualified to work at Super Lawn Trucks):

If applying for a supervisor, management or sales position, do you have a valid Georgia driver's license? Yes ___ No ___
What specific sales, fabrication, construction or manufacturing training have you had?

Do you have computer skills? ___ Yes ___ No

Words/Minute:

Office Use only: Test given? _____yes _____no

If applying for a general office position:

Accounts Receivable skills ___ Yes ___ No

Accounts Payable skills ___ Yes ___ No

In what computer software programs are you **proficient**? [Name the package(s).]

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY

In consideration of my employment, I agree to conform to the policies and procedures of Bass Custom Landscapes. I understand that in accepting this application, Bass Custom Landscapes is in no way obligated to provide me with employment and that I am not obligated to accept employment if offered. Furthermore, if employed, I understand that I am employed at will and that my employment and compensation can be terminated with or without cause, and with or without notice at any time.

I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that any falsified statements on this application or omission of fact on either this application or during the pre-employment process will result in my application being rejected, or, if I am hired, in my employment being terminated.

I understand that this application is valid for ninety (90) days from the date I sign it. If I expect consideration beyond that date, I understand it is necessary to resubmit another completed application.

I also understand that any offer of employment is conditioned on the completion of pre-employment tests and documentation. I will, upon request, sign all necessary consent forms.

Date

Signature

Super Lawn Trucks

Basic Skills Evaluation

1. Complete the following math problems: $10 \times 12 =$ $123 - 19 =$ $125 / 5 =$ $169 + 13 =$
2. Circle the number that is greater. $\frac{1}{4}$ " or $\frac{3}{8}$ " $\frac{1}{2}$ " or $\frac{7}{16}$ " $\frac{7}{8}$ " or $\frac{15}{16}$ "
3. You witness someone working in the company doing something unsafe. What would you do?
4. Think of a time you really excelled in your job or work. What were you doing?
5. Give 3 examples of things that frustrate you at work or things you do not enjoy doing.
6. Describe your personal goals for 1 year? 5 Years?
7. What are you currently looking for in a job/company?
8. Describe your perfect job and working environment.
9. What is your favorite music? Why?
10. Describe a personal accomplishment that you are most proud of.