



Polly's Planting & Plucking, Inc. Application for Employment

THIS IS A DRUG FREE WORKPLACE

8695 M-119
Harbor Springs, MI 49740
Phone: 231-439-9000
Fax: 231-439-9003
Free: 800-826-1659
polly@pollysplantingandplucking.com

Name _____
Last First Middle

Address _____
Street Apt
City State Zip

Phone(#s) _____

Email _____

Best way to contact you _____

Are you 18 or older? Yes No

Position(s) Applying For: (Please circle one) Greenhouse/Receiving Fine Gardening/Landscape Retail Sales

Wage Expectation: _____ Date you are available to begin work? _____

Are you available to work: Full-time Part-time Weekends

How were you referred to us? _____

Why do you want to work here? _____

Are you employed now? Yes No May we contact your present employer? Yes No

Does your present employer know of your plans to change employment? Yes No

Why do you desire to make a change? _____

Are you on a layoff and subject to recall? Yes No

Have you ever been discharged or requested to resign from a position? Yes No If yes, explain: _____

How much time have you lost from work during the last 12 months? _____

Do you have steady transportation to work? Yes No Do you hold a valid driver's license? Yes No

Have you been convicted of any moving violation(s) in the last 3 years? Yes No

If Yes, give date(s) and explanation: _____

Have you ever held a position of trust (handling money or confidential material)? Yes No

Are you legally eligible to work in the United States? Yes No
(Proof of citizenship/immigration status & identity is required upon employment)

Have you ever been convicted of or received a sentence for a crime(s) other than a minor traffic violation? Yes No (Answering "Yes" is not an automatic bar to employment) If so, state date, court and place where offense(s) occurred: _____

List three characteristics that best describe you: 1) _____

2) _____ 3) _____

What hobbies/activities do you enjoy outside of your job? _____

Tell us about any special skills or qualifications you acquired from employment or other experiences that may benefit you here: _____

Employment History (Must be completed even when accompanied by resume)

Start with your present or last job. Be specific about information and dates. A Complete work history must be provided. All employment "Gaps" must be listed.

Employer	Dates Employed		Summary of Work Performed & Job Responsibilities	
	From (Mo/Yr)	To (Mo/Yr)		
Address (Street, City and State)	Phone:			
Job Title	Hourly Rate/Salary			
	Starting	Final		
Supervisor				
Resigned • Terminated • State Reason:				
Employer	Dates Employed			Summary of Work Performed & Job Responsibilities
	From (Mo/Yr)	To (Mo/Yr)		
Address (Street, City and State)	Phone:			
Job Title	Hourly Rate/Salary			
	Starting	Final		
Supervisor				
Resigned • Terminated • State Reason:				
Employer	Dates Employed		Summary of Work Performed & Job Responsibilities	
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Address (Street, City and State)	Phone:			
Job Title	Hourly Rate/Salary			
	Starting	Final		
Supervisor				
Resigned • Terminated • State Reason:				

Educational Information

Name and location of high school: _____
 Name City State

Did you graduate high school or obtain a GED? _____

Name of College, other school or military branch served and location: _____
 Name

City State

Degree, other school credential, or rank at discharge: _____

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Applications are received and employees are hired without regard to race, creed, color, sex, religion, age, national origin, marital status, physical or mental handicap, disability, sexual orientation, veteran's status, citizenship status, or any other protected classes under state, local or country regulations. The receipt of this application does not mean that job openings exist and does not obligate us in any way. We appreciate your interest in our organization.

Agreement

The Facts set forth above in my application for employment are true and complete. I understand that false statements or omission of information on this application or any other employment form may lead to dismissal or denial of employment. I authorize the use of any information in this application to verify my statements, and I authorize the past employers, doctors, all references and any other persons to answer all questions asked concerning my ability, character, reputation, and previous employment record.

I understand that if my application is accepted that employment with this company at all times is employment "at will." It is further understood that this "at will" relationship may not be changed by any written document, verbal statements, or by conduct unless such change is specifically acknowledged by an authorized executive of the company. I further understand that my "at will" employment may be terminated at any time by myself or the company and includes no guarantee, contract, or promise of employment for any specific length of time.

 Signature of Applicant

 Date