



Morton
TREE AND LANDSCAPE MAINTENANCE, INC.

Application for Employment

EQUAL OPPORTUNITY EMPLOYER

DATE: _____

APPLICANT INFORMATION

Full Name: _____ Telephone: _____
Last First Middle

Present Address: _____
Number/Street City State Zip

How Long at Address: _____ Birthdate: _____ Social Security No. _____

If under 18, please list age: _____ Referred By: _____

EMPLOYMENT DESIRED

Position Applied For: _____ Salary Desired (Be Specific): _____

Employment Desired: FULL-TIME _____ PART-TIME _____ FULL OR PART-TIME _____

Date Available For Work: _____ Hours Weekly Available For Work: _____ Can You Work Nights? _____

Days/Hours Available to Work: No Preference _____ Thursday _____
 Monday _____ Friday _____
 Tuesday _____ Saturday _____
 Wednesday _____ Sunday _____

Are You Currently Employed? _____ If So, May We Contact Your Present Employer? _____

EDUCATION

TYPE OF SCHOOL	NAME	ADDRESS	YEARS ATTENDED	MAJORS & DEGREES
High School				
College				
Business or Trade School				

U.S MILITARY SERVICE

Branch of Service	Technical Specialization	Rank Attained

EMPLOYMENT HISTORY

Please list your work experience for the past five years beginning with your current or most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.

Employer:	Start Date:	End Date:
	Supervisor:	
	Supervisor Phone:	
Your Title:	Hours Per Week (average):	
Duties/Responsibilities:	Starting Pay:	
Reason for Leaving:	Ending Pay:	
	May we contact this employer?	
Employer:	Start Date:	End Date:
	Supervisor:	
	Supervisor Phone:	
Your Title:	Hours Per Week (average):	
Duties/Responsibilities:	Starting Pay:	
Reason for Leaving:	Ending Pay:	
	May we contact this employer?	
Employer:	Start Date:	End Date:
	Supervisor:	
	Supervisor Phone:	
Your Title:	Hours Per Week (average):	
Duties/Responsibilities:	Starting Pay:	
Reason for Leaving:	Ending Pay:	
	May we contact this employer?	
Employer:	Start Date:	End Date:
	Supervisor:	
	Supervisor Phone:	
Your Title:	Hours Per Week (average):	
Duties/Responsibilities:	Starting Pay:	
Reason for Leaving:	Ending Pay:	
	May we contact this employer?	
Employer:	Start Date:	End Date:
	Supervisor:	
	Supervisor Phone:	
Your Title:	Hours Per Week (average):	
Duties/Responsibilities:	Starting Pay:	
Reason for Leaving:	Ending Pay:	
	May we contact this employer?	

DRIVING HISTORY

What is your means of transportation to work? _____

Do you have a driver's license? ____ Yes ____ No Driver's License # _____ Expiration Date _____

State of Issue ____ Operator ____ Commercial (CDL) ____ Chauffeur ____

Have you had any accidents during the past three years? _____ How Many? _____

Have you had any moving violations during the past three years? _____ How Many? _____

COMPUTER SKILLS (office only)

Personal Computer: ____ PC ____ Mac Word ____ Excel ____ Access ____ Outlook ____ QuickBooks ____

10-Key: Yes ____ No ____ WPM ____ Adobe ____ PowerPoint ____

Please list any other skills, training, or information that may be helpful in considering your application.

REFERENCES

Please list two references other than relatives or previous employers.

Name:	Name:
Position:	Position:
Company:	Company:
Address:	Address:
Telephone:	Telephone:
Years Acquainted:	Years Acquainted:

LEGAL

Are you a U.S. /citizen or do you have a legal right and necessary documents to work in the U.S.? ____ Yes ____ No
(Identity and employment eligibility of all new hires will be verified as required by the Immigration Reform and Control Act of 1986.)

Have you been ever been convicted of a crime, excluding misdemeanors and summery offences, which has not been annulled, expunged or sealed by a court? ____ Yes ____ No

If yes, explain offence and final disposition: _____

Conviction of a crime will not necessarily be a bar to employment. Factors such as age at the time of the offense, type of offense, remoteness of the offense in the time, and rehabilitation will be taken into account in determining effect on suitability for employment.

AUTHORIZATION

I certify that the statements I have made are true and correct to the best of my knowledge. I understand that the submission of any false information or the omission of any requested information in connection with my application for employment, whether on this document or not, may be cause for failure to hire or for immediate discharge should I be employed by Morton Tree & Landscape.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I understand that, if hired, my employment would be "at-will" and could be terminated at any time by either party, with or without cause and with or without notice.

I consent to drug testing as may be requested by Morton Tree & Landscape representatives. (_____ Initial Here)

If hired I voluntarily authorize Morton Tree & Landscape and its agents to obtain criminal background information about me, including but not limited to information that was expunged, sealed, set aside or otherwise removed from my criminal record history but not including convictions that have been expunged pursuant to ORS 419A.260 and ORS 419A.262 for employment purposes in connection with my application and hire for employment with Morton Tree & Landscape. I also authorize and direct law enforcement authorities, court personnel, and any other public or private officer or person, to disclose all of the aforesaid information, without condition or qualification, to Morton Tree & Landscape. (_____ Initial Here)

Signed: _____ **Date:** _____