



APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

PERSONAL INFORMATION

Last Name	First Name	Middle Initial	Email Address
Address	City	State	Zip
Home Telephone Number		Cell or Alternate Telephone Number	
Are you 18 years of age or older? YES NO		Are you legally authorized to work in the United States? YES NO	

GENERAL INFORMATION

Position(s) desired:	Classification desired: Full-time Part-time Seasonal Circle all that apply. Winter Summer
Have you ever applied at or worked with DJ's Landscape Management, Inc. before? If yes, when and in what capacity? YES NO	Rate of desired pay: \$_____ per (check one) <input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Yearly
Do you have any relatives or close friends who currently work for DJ's Landscape Management, Inc.? YES NO If yes, please list.	When are you available to begin working?
Have you ever been convicted of a criminal offense? YES NO If yes, please explain include date, place, and conviction(s):	Are there any felony charges pending against you? YES NO If yes, please provide place and charge(s):
How did you happen to apply at DJ's Landscape Management, Inc.? Please check box and provide specific information. <input type="checkbox"/> Team Member <input type="checkbox"/> Friend <input type="checkbox"/> School <input type="checkbox"/> Agency <input type="checkbox"/> Advertisement <input type="checkbox"/> Other	
Do you have a current Michigan Driver's License? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, why? Check if Chauffeur _____ or CDL _____ endorsement.	
Has your license ever been suspended or revoked? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Why?	
Driver's License Number:	Current number of Points:

EDUCATION

Type of School	School Name, Location Phone Number	Number of Years Attended	Major/Area of Study	Did you graduate? If so, please list your degree.	Grade Point Average
High School				YES NO	
College				YES NO	
Other				YES NO	

Have you attended any continuing education programs related to the job for which you are applying within the past two years? If so, please list:

WORK EXPERIENCE Please list below present and past employment, beginning with your most recent, if additional space is needed, use back of application. **Do not indicate "See Resume"**.

Company Name: Location: Supervisor: Phone Number:	Dates of Employment	Position Title/ Primary Duties	Employment Status (check one) <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Seasonal	Rate of Pay \$_____per (check one) <input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Yearly
Reason for leaving	Are you eligible for rehire? YES NO If no, please explain.		May we contact this employer? YES NO If no, please explain.	
Company Name: Location: Supervisor: Phone Number:	Dates of Employment	Position Title/ Primary Duties	Employment Status (check one) <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Seasonal	Rate of Pay \$_____per (check one) <input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Yearly
Reason for leaving	Are you eligible for rehire? YES NO If no, please explain.		May we contact this employer? YES NO If no, please explain.	

JOB-RELATED SKILLS AND ABILITIES

List the skills you have that pertain to the position you are applying for:

Additional career training and qualifications:

MILITARY RECORD

Do you have any Service in the U.S. Armed Forces or State Militia? YES NO If yes, please complete below.

Branch and Dates of Service: Rank on Discharge:

Special skills or training acquired during service: Reserve Status:

APPLICANT AUTHORIZATION AND RELEASE

I voluntarily give DJ's Landscape Management, Inc. the right to make a thorough investigation of my background, current and past employment and education, and credentials and qualifications and I agree to cooperate in any such investigation(s). I release from all liabilities or responsibility all persons, educational institutions, medical facilities, companies or corporations disclosing and supplying background, employment, educational, credential or qualification related information about me. I waive any rights to notice of such disclosures. I further acknowledge that DJ's Landscape Management, Inc. relies upon the accuracy of information contained in the employment application, as well as the accuracy of other data presented, verbally or in writing, throughout the hiring process and the employment relationship and therefore authorize the above investigations during the hiring process and at any other time during the employment relationship.

I understand that DJ's Landscape Management, Inc. is an at-will employer which means that either I or DJ's Landscape Management, Inc. may terminate the employment relationship at any time, with or without a reason, and with or without advance notice. In addition, I understand that I will be subject to a ninety (90) day Introductory Period which is intended as an orientation period and an opportunity for feedback after beginning employment; further, at the conclusion of the Introductory Period, a determination will be made whether the Introductory Period has been satisfactory, will be extended, or the employment relationship terminated. I understand that the existence of the Introductory Period in no way alters or changes the at will status of my employment with DJ's Landscape Management, Inc.

I understand that, if employed, I will be required to follow and comply with the policies and procedures of DJ's Landscape Management, Inc. and that failure to do so may lead to the termination of my employment. I further understand that DJ's Landscape Management, Inc. reserves the right to and may at times change, revise, add or delete policies and procedures as necessary, and I will be obligated to conform to such changes.

I understand and agree that DJ's Landscape Management, Inc. reserves the right to require an employee to submit to drug or alcohol testing as part of its pre-employment screening and / or during the employment relationship where, in its sole discretion, it believes an issue may exist which may be related to my drug or alcohol usage and I consent to submit to drug or alcohol testing as a condition of employment and/or continued employment. I acknowledge that remaining free of illegal drug use is a condition of my employment.

I hereby certify that the above information supplied by me is true and complete. I agree that if employed, discovery of any misrepresentation, falsification, or omission of facts on this Application for Employment or otherwise provided by me shall justify immediate termination of my employment, regardless of the time elapsed before discovery.

Applicant's Signature	Today's Date: (Application good 30 days from date)
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