

Date Received_____

Date Hired_____

The Flower Bin Garden Center and Nursery
APPLICATION FOR EMPLOYMENT

Applicants who are hired will be required to present documents verifying that they are authorized to work in the U.S.

**** You will be contacted only if we wish to schedule an interview!****

(PLEASE PRINT)

Please complete entire application.

DATE_____

NAME_____ **PHONE**_____

If you are applying for a specific position(s), please circle the appropriate department(s) from the list below.

Cashier

Nursery/Shrubs

Annuals

Hard Goods/Fertilizers/Lawns

Perennials

Foliage (house plants)

Roses

Vegetables

Lawns

Loader

Security

Are you available to work: Full-Time?____yes____no

Part-Time?____yes____no

If part time, please indicate days, number of hours and times you are available:

Are you currently employed? Yes____No____ When are you available to start? _____

Will you accept a seasonal position?_____

(MOST POSITIONS REQUIRE WORKING SOME SATURDAYS AND SUNDAYS)

Are you able to work both Saturday and Sunday when required? Y____N____

Will you need to request any time off prior to July? Y____N____ If yes, when_____

(OVER)

Last Name	First Name	Middle Name	Telephone
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Present Street Address	City	State	Zip Code
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Have you ever applied here before? Y_____N_____ When?_____

Were you ever employed here? Y_____N_____ When?_____

Why did you choose to apply at The Flower Bin?

What experiences, qualifications, or skills qualify you for the position(s) you are applying for?

What machines or equipment can you operate that are related to the job(s) for which you are applying?

**AN ESSENTIAL FUNCTION OF VARIOUS DEPARTMENTS IS THE LIFTING AND
CARRYING OF HEAVY MATERIALS.**

Are you able to lift 30 lbs to your waist or carry it 100 feet? Y____ N ____

Are you able to lift 50 lbs to your waist or carry it 100 feet? Y____N____

EDUCATION

School	Name, City, State	# of Years Completed	Degree
High School	_____	_____	_____
College/University	_____	_____	_____
Vocational/Technical	_____	_____	_____
Other	_____	_____	_____

PREVIOUS EMPLOYMENT

Beginning with your current or last employer, list the jobs you've held for the past 7-seven years

Employer		Telephone Number	Address (Street, City, State)		
Title of your Position	Date Started	Date Ended	Supervisor		
Reason for Leaving					
Describe Work Performed					

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