

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.

Last Name	First Name	Middle Name	Telephone
Present Street Address	City	State	Zip Code

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

- | | | |
|------------------------|----------------|------------------------|
| CASHIER | PERENNIALS | ANNUALS |
| HARD GOODS/FERTILIZERS | NURSERY/SHRUBS | FOLIAGE (HOUSE PLANTS) |
| SECURITY | ROSES | VEGETABLES |
| LOADER | | HERBS |

Are you available to work: **FULL-TIME? YES** _____ **NO** _____
PART-TIME? YES _____ **NO** _____

If part time, please indicate the 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? **YES** _____ **NO** _____

(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 _____

Have you ever applied here before? Y _____ N _____ When? _____

Were you ever employed here? Y _____ N _____ When? _____

Are you legally able to be employed in the United States? Yes ___ No ___

Do you have a valid driver's license? Yes ___ No ___

Why did you choose to apply to 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 / CERTIFICATIONS

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

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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