

APPLICATION FOR EMPLOYMENT

WE CONSIDER APPLICANTS FOR ALL POSITIONS WITHOUT REGARD TO RACE, COLOR, RELIGION, CREED, GENDER, NATIONAL ORIGIN, AGE, DISABILITY, MARITAL OR VETERAN STATUS, OR ANY OTHER LEGALLY PROTECTED STATUS.

*****PLEASE PRINT*****

POSITION APPLIED FOR	DATE OF APPLICATION	PHONE NUMBER	<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME <input type="checkbox"/> TEMPORARY
LAST NAME	FIRST NAME	MIDDLE NAME	DATE AVAILABLE FOR WORK
ADDRESS			
	BEST TIME TO CONTACT YOU AT HOME	DESIRED SALARY	

IF YOU ARE UNDER 18 YEARS OF AGE, CAN YOU PROVIDE REQUIRED PROOF OF YOUR ELIGIBILITY TO WORK? YES
 NO

ARE YOU CURRENTLY EMPLOYED? YES
 NO

MAY WE CONTACT YOUR PRESENT EMPLOYER? YES
 NO

ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED IN THIS COUNTRY BECAUSE OF VISA OR IMMIGRATION STATUS? YES
 NO

CAN YOU TRAVEL IF A JOB REQUIRES IT? YES
 NO

NAME & ADDRESS OF SCHOOL	COURSE OF STUDY	YEARS COMPLETED	DIPLOMA

SPECIALIZED TRAINING & SKILLS: (EXPLAIN BELOW)	PLEASE CHECK
	<input type="checkbox"/> CDL LICENSE
	<input type="checkbox"/> BOBCAT
	<input type="checkbox"/> TRACTOR
	<input type="checkbox"/> TRUCK
	<input type="checkbox"/> COMPUTER

ADDITIONAL INFORMATION: (EXTRA-CURRICULAR ACTIVITIES, OTHER QUALIFICATIONS, ETC.)

NOTE: Your application will NOT be considered if you do not complete the Motor Vehicle Record. We will run a Motor Vehicle Record check on you before we schedule an interview.

PERSONAL/PROFESSIONAL REFERENCES(Do not Include family members)

NAME	ADDRESS	PHONE #	OCCUPATION

WORK EXPERIENCE: (START WITH YOUR PRESENT JOB)			
EMPLOYER	ADDRESS/PHONE	DATES EMPLOYED	WORK PERFORMED

REASON FOR LEAVING:			
EMPLOYER	ADDRESS/PHONE	DATES EMPLOYED	WORK PERFORMED

REASON FOR LEAVING:			
EMPLOYER	ADDRESS/PHONE	DATES EMPLOYED	WORK PERFORMED

REASON FOR LEAVING:

COMMENTS: INCLUDE EXPLANATION OF ANY GAPS IN EMPLOYMENT.

APPLICANT'S STATEMENT

I CERTIFY THAT ANSWERS GIVEN HEREIN ARE TRUE AND COMPLETE. I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION FOR EMPLOYMENT AS MAY BE NECESSARY IN ARRIVING AT AN EMPLOYMENT DECISION. THIS APPLICATION FOR EMPLOYMENT SHALL BE CONSIDERED ACTIVE FOR A PERIOD OF TIME NOT TO EXCEED 45 DAYS. ANY APPLICANT WISHING TO BE CONSIDERED FOR EMPLOYMENT BEYOND THIS TIME PERIOD SHOULD INQUIRE AS TO WHETHER OR NOT APPLICATIONS ARE BEING ACCEPTED AT THAT TIME. I HEREBY UNDERSTAND AND ACKNOWLEDGE THAT, UNLESS OTHERWISE DEFINED BY APPLICABLE LAW, ANY EMPLOYMENT RELATIONSHIP WITH THIS ORGANIZATION IS OF AN "AT WILL" NATURE, WHICH MEANS THAT THE EMPLOYEE MAY RESIGN AT ANY TIME AND THE EMPLOYER MAY DISCHARGE EMPLOYEE AT ANY TIME WITH OR WITHOUT CAUSE. IT IS FURTHER UNDERSTOOD THAT THIS "AT WILL" EMPLOYMENT RELATIONSHIP MAY NOT BE CHANGED BY ANY WRITTEN DOCUMENT OR BY CONDUCT UNLESS SUCH CHANGE IS SPECIFICALLY ACKNOWLEDGED IN WRITING BY AN AUTHORIZED EXECUTIVE OF THIS ORGANIZATION. IN THE EVENT OF EMPLOYMENT, I UNDERSTAND THAT FALSE OR MISLEADING INFORMATION GIVEN IN MY APPLICATION OR INTERVIEW MAY RESULT IN DISCHARGE. I UNDERSTAND, ALSO THAT I AM REQUIRED TO ABIDE BY ALL RULES AND REGULATIONS OF THE EMPLOYER.

_____ signature of applicant

_____ date

Motor Vehicle Record Disclosure and Release

In connection with my ongoing employment or my application for employment, should I have or secure a position with Winona Nursery, I understand that a motor vehicle record which contains public record information may be requested. I further understand that such report(s) will contain personal information and public record information concerning my driving record from federal, state and other agencies which maintain such records, as well as independent services that provide driving record information.

I authorize, without reservation, any party or agency contacted to furnish the above-mentioned information to: Winona Nursery.

I hereby authorize procurement of my motor vehicle record report. If hired, this authorization shall remain on file and shall serve as ongoing authorization for you to procure such reports at any time during my employment.

Winona Nursery's commercial auto insurer and agent will also use this information in conjunction with loss control and safety review efforts.

If being offered employment in Minnesota, California or Oklahoma – Are you requesting a copy of the MVR?
 Yes No

Full Legal Name (include Middle Initial)

Drivers License Number

Signature

Date