



**DANDINI**

**LANDSCAPING CO., INC.**

**APPLICATION FOR EMPLOYMENT**

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_ SOCIAL SECURITY NO. \_\_\_\_\_

PRESENT ADDRESS \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

LENGTH OF TIME AT PRESENT ADDRESS \_\_\_\_\_

Do you have any physical condition which may limit your ability to perform the particular job for which you are applying? \_\_\_\_\_

If yes, describe the condition: \_\_\_\_\_

What method of transportation will you use to get to work? \_\_\_\_\_

Position applied for: \_\_\_\_\_ Referred by: \_\_\_\_\_

Rate of pay expected: \_\_\_\_\_ per week \_\_\_\_\_

Would you work Full-time \_\_\_\_\_ Part-time \_\_\_\_\_

Start date: \_\_\_\_\_ Specify days available and hours: \_\_\_\_\_

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY

Are there any experiences, skills or qualifications which you feel would especially fit you for work with our organization? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Record of Education**

Name of School	Address of School	Last Year Completed	Degree



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**PAST EMPLOYMENT**

List below all present and past employment, beginning with your most recent.

Name & Type of Business/Supervisor	Address & Telephone # of Business	Employed From-To	Job Description	Reason For Leaving
1.)				
2.)				
3.)				
4.)				

May we contact the employers listed above? \_\_\_\_\_ If not, indicate by "NO" which one (s) you do not wish us to contact.

**PERSONAL REFERENCES**

Name & Occupation	Address	Telephone #
1.) _____	_____	_____
2.) _____	_____	_____
3.) _____	_____	_____
4.) _____	_____	_____

**\* DO NOT LIST FORMER EMPLOYERS OR RELATIVES.**