



GREEN ACRES IRRIGATION CO. INC.
P.O. BOX 346
ROCKLAND, MA.02370

APPLICATION OF EMPLOYMENT

TO THE APPLICANT:

GREEN ACRES IRRIGATION DOES NOT DISCRIMINATE IN HIRING OR EMPLOYMENT ON THE BASIS OF RACE, RELIGION, COLOR, NATIONAL ORIGIN, SEX, AGE, DISABILITY, AND VETERAN STATUS OR ANY OTHER PROHIBITED BASIS. NO QUESTION ON THIS APPLICATION IS INTENDED TO SECURE INFORMATION TO BE USED FOR SUCH DISCRIMINATION.

THIS APPLICATION WILL BE KEPT ACTIVE FOR 30 DAYS FOR TECH POSITIONS OR 60 DAYS FOR SALARIED/ADMINISTRATIVE POSITIONS. IF YOU WOULD LIKE CONSIDERATION AFTER THAT, YOU CAN FILE A NEW APPLICATION IF POSITIONS ARE AVAILABLE.

General Information (please Print)

Date _____ / _____ / _____

NAME			
	LAST	FIRST	MIDDLE
	STREET		
	CITY	STATE	ZIP
SOCIAL SECURITY NUMBER			TELEPHONE
POSITIONS) APPLIED FOR			CELL NUMBER
PRODUCTION _____ DRIVER _____ OFFICE/ADMINISTRATION _____	OTHER 		

Do you have the legal right to live and work in the U.S.? YES _____ NO _____

If hired, can you provide the documentation required by U.S. law? YES _____ NO _____

How were you referred to green acres Irrigation? _____

Are you at least 18 years old? _____ Yes _____ No If under 18, what is your age? _____

FOR OFFICE USE ONLY

FOR APPLICANTS APPLYING FOR DRIVERS POSITION ONLY: INCLUDING A JOB DRIVING A COMPANY VEHICLE.

Do you have in your possession a legal and current drivers license? _____ For which state? _____

Type of license you possess? Chauffeurs _____ CDL _____ Other _____

Experience operating manual transmissions Yes No How many years? _____

In case of emergency name and phone#: _____

HAVE YOU: Since the age of 18, ever been convicted of a misdemeanor or felony? **NOTE:** A conviction will not necessarily bar you from employment. Each conviction will be judged on its own merits with respect to time, circumstances and seriousness. If so, please advise nature and date. (Please continue on back if necessary.)

Have you ever worked for this company before? Yes _____ No _____

Please indicate when and position held: _____

Under any other name? If so, under what name: _____

Do you have a relative or friend employed by this company? Yes _____ No _____

Employees Name: _____ Relationship: _____

Are you applying for FULL TIME _____ Part-Time _____ SUMMER _____

Are you currently employed? _____ If so, may we contact your present employer? _____

If you are accepted for employment, when would you be available? _____

SPECIAL SKILLS AND QUALIFICATIONS

Summarize special skills and qualifications acquired from employment or other experience including the use of hand and power tools: _____

If you were in the military, please detail the job experience gained there: Branch _____

Dates Served, From _____ To: _____

Education:				
	NAME AND ADDRESS OF SCHOOL	JOB RELATED COURSES	CIRCLE LAST YEAR COMPLETED	MONTH AND YEAR GRADUATED
GRAMMAR/JUNIOR HIGH			1 2 3 4 5 6 7 8	XXXXXXXXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXX
HIGH SCHOOL			9 10 11 12	XXXXXXXXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXX
COLLEGE OR TECHNICAL			1 2 3 4	
OTHER				

EXPERIENCE: (Enter most recent employment first)

Name/Company _____	Start Date: _____	End Date: _____
Street Address _____	City, State, Zip _____	
Job Title/Duties _____	Phone#: _____	
Reason for Leaving: _____		
Okay to Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, provide details/alternative: _____		
Name/Company _____	Start Date: _____	End Date: _____
Street Address _____	City, State, Zip _____	
Job Title/Duties _____	Phone#: _____	
Reason for Leaving: _____		
Okay to Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, provide details/alternative: _____		
Name/Company _____	Start Date: _____	End Date: _____
Street Address _____	City, State, Zip _____	
Job Title/Duties _____	Phone#: _____	
Reason for Leaving: _____		
Okay to Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, provide details/alternative: _____		

REFERENCES: (Previous supervisors preferred)

NAME/CURRENT COMPANY	PHONE	OCCUPATION

THIS AREA IS RESERVED FOR COMMENTS YOU WISH TO MAKE CONCERNING INFORMATION NOT COVERED IN THIS APPLICATION FORM: THIS IS OPTIONAL AND NOT REQUIRED FOR COMPLETION OF YOUR APPLICATION.

APPLICANT CERTIFICATION

1. I Certify that the answers and information in this application are true and complete. I understand that any false or misleading information provided, or omitted, on this application, in my resume, or during any interview is grounds to disqualify me for consideration for employment and , if discovered after my hire, is grounds for discharge.

2. Except where indicated above, I authorize you to contact my present employers references, schools and other sources to investigate my background and to verify any of the information contained in this application, in any accompanying resume, or in any interview. I further authorize those employers, references, schools and other sources to give Green Acres Irrigation any and all information concerning my previous employment, education, conduct, and any other relevant information they may have, personal or otherwise.

3. I Hereby release and forever discharge all such persons, companies or other sources, and their agents and employees, and Green Acres Irrigation and its agents and employees, from any and all claims, known or unknown, which may result from disclosure or collection of requested information.

4. Although management makes every effort to accommodate individual preferences, business needs may at times make the following conditions mandatory; overtime work or a work schedule other than Monday through Friday. I understand and accept these as conditions of my employment.

5. I understand that this application for employment is not a contract of employment and that if I am hired, my employment with Greren Acres Irrigation is at-will and can be terminated without cause and without notice at the option of the company or myself.

6. I certify that no representations have been made to me, written or oral, that alter the at-will nature of the employment relationship. I further understand that the at-will nature of the employment relationship may not be changed unless specifically acknowledge in writing by the President of Green Acres Irrigation in a document signed by both me and the President.

I acknowledge by my signature that I have read and understand the above.

DATE: _____ SIGNATURE: _____

DO NOT WRITE BELOW THIS LINE FOR OFFICE USE ONLY

INTERVIEWED BY:	DATE	COMMENTS:
REFERENCE CHECKED:	DATE	COMMENTS: