GREEN SPRAY

Name:		
Home Phone:	Cell:	
Current Street Address:		City:
State: Zip:	Email Address:	
Employment Positions		
Position(s) applying for:		
• Regular part-time work? [] Y or [] N	Regular full-time work? [] Y or [] N
What days and hours are you available for work?		
If hired, on what date can you start working?	_//	
Can you work on the weekends? [] Y or [] N	Can you work evenings?	[] Y or [] N
Are you available to work overtime? [] Y or [] N	N Salary desired: \$	
Personal Information:		
Have you ever applied to / worked for Company If yes, please explain (include date):		
Do you have any friends, relatives, or acquaintan If yes, state name & relationship:		
Are you over the age of 18? (If under 18, hire is sul	bject to verification of minin	num legal age.) [] Y or [] N
If hired, would you be able to present evidence of States? [] Y or [] N	f your U.S. citizenship or	proof of your legal right to work in the United
Have you ever been convicted of a criminal offer	nse (felony or misdemean	or)? [] Y or [] N
If yes, please describe the crime - state nature of	the crime(s), when and w	here convicted and disposition of the case
(Note: No applicant will be denied employment solely on the ground significant details that affect the description of the event, and the surhowever, be considered.)		
Education, Training and Experience		
High School: School name: Number of years completed:	School City, State, & Zip Did you graduate	o: ? [] Y or [] N

College / University:	School City, State, & Zip:	
School name: School City, State, & Zip: Number of years completed: Did you graduate? [] Y or [] N		
Employment History		
Are you currently employed? [] Y or [] N	If yes, may we contact your current employer? [] Y or [] N	
Below, please describe past and present em	ployment positions, dating back five years.	
Employer:	Name of Supervisor:	
Telephone Number:	Business Type:	
Length of Employment (Include Dates):	Position & Duties:	
Reason for Leaving:	May we contact this employer for references? [] Y or [] N	
Employer: Telephone Number:	Name of Supervisor:Business Type:	
Length of Employment (Include Dates):	Position & Duties:	
Reason for Leaving:		
References:		
List below (3) persons who have knowledg professional references only.	e of your work performance within the last four years, please include	
Name - First, Last:	Phone Number:	
Occupation:	Number of Years Acquainted:	
Name - First, Last:	Phone Number:	
Occupation:	Number of Years Acquainted:	
Occupation:	Phone Number:Number of Years Acquainted:	
Please Read and Initial Each Paragra	nph, then Sign Below	
correct to the best of my knowledge and ability. I understan	that might adversely affect my chances for hiring. I attest to the fact that the answers given by me are true & id that any omission (including any misstatement) of material fact on this application or on any document r, if I am employed by this company, terms for my immediate expulsion from the company.	
I understand that if I am employed, my employment is not company.	definite and can be terminated at any time either with or without prior notice, and by either me or the	
listed to disclose any information related to my work record	employment, education record, and any other information I have provided. I authorize the references I have d and my professional experiences with them, without giving me prior notice of such disclosure. In addition, I cons, corporations, partnerships & associations from any & all claims, demands or liabilities arising out of or	