

EMPLOYMENT APPLICATION

FOR

DUNLAP LAWN CARE, INC.

P.O. BOX 10781

RUSSELLVILLE, AR 72812

OFF: 479-641-1085

FAX: 479-641-5099

EMAIL: dunlaplawncare@yahoo.com

Please fill this out and mail or fax it back to us!

Date: _____

Full Name: _____ Age: _____
(first) (last)

Social Security: _____ Driver's License: _____

Physical Address: _____
(city) (state) (zip)

Mailing Address: _____
(if different from above)

Phone #: _____ Cell#: _____ Wages per Hour: _____

Position: _____ Date available to work: _____ Full Time /Part Time

Available 40+ hrs / 7days a week? yes or no

Job Requirements brief: Highly motivated and able to lift 50 lbs continuously. Must be in good physical condition. After reading the job requirements, are you able to perform all duties indicated with or without reasonable accommodation? yes or no

List any health conditions (if any).

Did you serve in the military? yes or no

Do you have a valid driver's license? yes or no

Do you have a CDL license? yes or no

Have you ever been convicted of a felony? yes or no, Drug Charge? yes or no, DWI? yes or no (if yes explain.....

Are you legally eligible for employment in the U.S.? yes or no

Must pass drug test! Random drug testing. Absolutely no tolerance

Work History: List your last three job.

Name of Company	Phone #	Date To: From:	Reason for Leaving
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Education:

High School _____ Graduated? yes or no

College _____ Graduated? yes or no

Reference: List below three individuals who have known for 5 years or more....

Name	Occupation	Address / Phone #

Read, Sign and Date

All applications for employment are judged solely on the basis of qualification and ability without regard to age, sex, race, national origin, religion, sexual orientation, marital status, disability, veteran status or other classification protected by law.

I acknowledge the the Company follows employment at will policy, such that I or the Company may terminate my employment at any time for any reason. I understand that this application is not a contract of employment. I understand that to be employed, I must be lawfully authorized to work in the U.S. and show the Company documentation that will prove this.

I understand and agree that my previous employers may be contacted and that an investigative report may be generated on me. That report may include information as to my character, work habits, performance and experience, along with reason for termination of past employment; financial/credit history and/or criminal/driving record history. I fully consent to and understand that Dunlap Lawn Care may request information from public and private sources about any of the information noted on this application.

Your Signature: _____ Date: _____

Mail or Fax back to us