

C&R Tractor & Landscaping, Inc.

Employment Application Form

Date: _____					
Name _____					
Last		First		Middle	
Present address _____					
Number		Street	City	State	Zip
How long at current address _____			Social Security No. _____ - _____ - _____		
Home Phone () _____		Mobile Phone () _____			
Email Address: _____					
Are you currently authorized to work in the United States? <input type="checkbox"/> YES <input type="checkbox"/> NO. Proof of eligibility will be required if hired.					
Position applied for: _____			Wage desired: _____		
When are you available to start work? _____					
Have you ever worked for this company?		If Yes when?			
Have you ever been convicted of a felony?		If Yes explain:			
EDUCATION					
	NAME OF SCHOOL	LOCATION	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE	
TYPE OF SCHOOL					
High School					
College					
Bus. or Trade School					
Professional School					
Employee Referral? Name _____					
MILITARY					
HAVE YOU EVER BEEN IN THE ARMED FORCES? <input type="checkbox"/> Yes <input type="checkbox"/> No					
ARE YOU NOW A MEMBER in the ARMED FORCES? _____ <input type="checkbox"/>					
Yes _____ <input type="checkbox"/> No					
Specialty _____		Date Entered _____		Discharge Date _____	

WORK EXPERIENCE

Please list your work experience for the beginning with your most recent job held.
If you were self-employed, give firm name. Attach additional sheets if necessary.

Reason for leaving (be specific)	Name of last supervisor	Employment dates	Pay or salary
Name of employer Address		From To	Start Final
City, State, Zip Code Phone number	Your last job title		
Reason for leaving (be specific)	Name of last supervisor	Employment dates	Pay or salary
Name of employer Address		From To	Start Final
City, State, Zip Code Phone number	Your Last Job Title		
Reason for leaving (be specific)	Name of last supervisor	Employment dates	Pay or salary
Name of employer Address		From To	Start Final
City, State, Zip Code Phone number	Your last job title		
May we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No			

REFERENCES

List three professional references.

Full Name:	Relationship:
Company:	Phone number:
Address	
Full Name:	Relationship:
Company:	Phone number:
Address	
Full Name:	Relationship:
Company:	Phone number:
Address	

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or the interview may result in my release.

Signature: _____