

Applicant Name _____ Date _____



Application for Employment

Jim Whiting Nursery and Garden Center Inc.
3430 19th St NW Rochester, Mn 55901
Ph 507-289-3741
Fx 507-289-4165

jimwhitingnursery.com

Employment Questionnaire

This company is an equal opportunity employer, making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. Jim Whiting Nursery is a drug and alcohol free workplace that may request in pre-employment and random testing of their employees.

Date of Application: _____ Phone Number _____

Full Name _____ Last _____ First _____ Middle _____ Email: _____

Full Address _____

Prior address if less than 5 years _____

I am applying for a position as: _____

If full time employment is not available, would you accept part-time? Yes _____ No _____

Are you 18 years of age or older? Yes _____ No _____ If no, please state age: _____

Education

<u>Name</u>	<u>City/State</u>	<u>Grade Average</u>	<u>Certificate or Diploma</u>
High School _____			
College _____			
Business or Trade School _____			
Other Training or Education _____			

General Information

Will you travel? Yes ___ No ___ Ever Bonded? Yes ___ No ___ If yes, when and by whom _____

Have you previously filed an application with the company? Yes ___ No ___ If yes, what year? _____

Were you ever employed at this company? Yes ___ No ___ If yes, please state when and what department _____

Date available to start work? _____

Will you be available for mandatory training before starting employment? Yes ___ No ___

Do you have any relatives now employed at this company? Yes ___ No ___

If so, names _____

Do you have any friends now employed at this company? Yes ___ No ___

If so, names: _____

Emergency contact name and number _____

Experience

1.) Current or
Last Employer _____ Position held _____

Address _____ Supervisor: _____

Dates of employment: Start: _____ End: _____ Wage / Salary: _____

Major Duties: _____

Reason for Leaving: _____

2.) Current or
Last Employer _____ Position held _____

Address _____ Supervisor: _____

Dates of employment: Start: _____ End: _____ Wage / Salary: _____

Major Duties: _____

Reason for Leaving: _____

3.) Current or
Last Employer _____ Position held _____

Address _____ Supervisor: _____

Dates of employment: Start: _____ End: _____ Wage / Salary: _____

Major Duties: _____

Reason for Leaving: _____

Additional Information

I was referred by: _____

Work performed on a volunteer basis: _____

Have you ever been discharged by an employer? Yes _____ No _____ If yes, please explain: _____

Briefly state why you want to work for this company: _____

Personal References

Do not use former employers or relatives.

Full Name _____ Occupation _____

Address _____ Phone # _____

Full Name _____ Occupation _____

Address _____ Phone # _____

Essential Job Functions

Our retail operation has several different types of positions. Each type has essential job functions listed below. Please respond to the questions listed under the type(s) of job(s) for which you are applying. You may apply for and be interviewed for more than one type of job.

GARDEN CENTER

1. Can you walk and stand on the job for extended periods of time - possibly up to **10** hours? Yes_ No_
2. Can you consistently lift items that weigh up to 50 pounds? Yes_ No_
3. Can you frequently bend, squat, reach, lift, carry, push, and pull which will be necessary when unloading trucks or stocking merchandise items? Yes_ No_
4. Can you work around products such as lawn chemicals, paints, solvents, chemical cleaners and thinners? Yes_ No_
5. Do you have previous experience selling or dealing with people in sales-related situations? Yes_ No_
6. Are you available to work Saturdays, Sundays, and evenings? Yes_ No_

LANDSCAPE /OUTSIDE YARD/ POSITIONS

1. Can you consistently lift items weighing up to 50 pounds? Yes_ No_
2. Have you ever operated motorized equipment such as forklifts, front end loaders? Yes_ No_
3. Do you have a valid driver's license? Yes_ No_
4. Can you frequently bend, squat, reach, lift, carry, push, and pull which will be necessary when loading or unloading trucks and stocking merchandise? Yes_ No_
5. Are you available to work Saturdays, Sundays, and evenings? Yes_ No_
6. Can you work handling lawn chemicals, solvents, and cleaning chemicals? Yes_ No_

CUSTOMER SERVICE

1. Can you consistently lift items weighing up to 50 pounds? Yes_ No_
2. Do you have experience in handling payroll, accounts payable, accounts receivable, or general ledger on a manual or computerized system? Yes_ No_
3. Do you have experience working a cash register or handling cash transactions? Yes_ No_
4. Have you ever been required to make cash bank deposits for a business? Yes_ No_
5. Are you available to work Saturdays, Sundays, and evenings? Yes_ No_

Please add any comments or additional information you feel is applicable.

Did you complete this application yourself? Yes_ No_ If not, who did ?_ _____

The information given on the application is true and correct to the best of my knowledge. I authorize this company to investigate all statements on this application. Falsification or elimination of information on this application is cause for dismissal at any time if employed.

I understand that my employment with Jim Whiting Nursery shall be probationary for a period of ninety (90) days, and further that at any time during the probationary period or thereafter, my employment relation with Jim Whiting Nursery is terminable at will for any reason by either party.

I understand that this company is legally permitted to require a physical examination as a condition of employment once a job offer has been made. I certify that my responses above are true and correct and that I know of no limitations which would prevent me from performing the essential job functions. I

As a condition of employment once a job offer has been made or when I am interviewed, I understand that this company is legally permitted to ask about my criminal background or conduct a background check as well as the status of my US Citizenship.

Applicant Signature_ _____

Date _____