



Application for Employment

5625 Pine Lake Road
Lincoln, NE 68516

2342 South 40th Street
Lincoln, NE 68506

Name: _____
 First Middle Last

Current Address: _____
 Street City State Zip

Telephone Number: (____) _____ Email Address: _____

Are you available for full time work (Including weekends if necessary)? YES NO

What hours are you available to work?	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Position(s) Desired

- | | | |
|---|---|---------------------------------------|
| <input type="checkbox"/> Container Production | <input type="checkbox"/> Cashier/Customer Service Rep. | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Field Production | <input type="checkbox"/> Courtesy Personnel | |
| <input type="checkbox"/> Landscape Crew | <input type="checkbox"/> Delivery/Nursery | |
| <input type="checkbox"/> Landscape Crew Foreman | <input type="checkbox"/> Greenhouse | |
| <input type="checkbox"/> Landscape Designer | <input type="checkbox"/> Horticulturist/Sales Personnel | Wage Expected (minimum) |
| <input type="checkbox"/> Landscape Design Draftsman | <input type="checkbox"/> Office | _____ |

I Have Read The Job Description And Understand The Requirements Needed To Perform The Job: YES NO

After Reviewing The Job Description, Is There Any Basis On Which You Would Not Be Able To Perform The Essential Functions Of The Position? YES NO If Yes, Please Explain _____

When Will You Be Available To Begin Work? _____

Drivers License #: _____ State _____ Expires _____

Is Your License Currently Suspended Or Revoked? _____

If Any, What Convictions For Moving Violations Have You Received Within The Past Three Years? _____

If Any, What Convictions Have You Received OTHER than traffic violations? _____

(Conviction of a crime will not automatically disqualify you from employment)

Are You At Least 18 Years Of Age? _____ Can You Show Proof Of Age Upon Hire? _____

If You Are Under 15 Years Of Age, Can You Produce A Work Permit? _____

Are You Legally Eligible For Employment In The United States? _____

How Were Your Referred To This Position? _____

(Please specify name of publication or employee if employee referral)

EMPLOYMENT HISTORY

PLEASE GIVE AN ACCURATE, COMPLETE FULL-TIME AND PART-TIME EMPLOYMENT RECORD,
STARTING WITH YOUR MOST RECENT EMPLOYER.

1. _____
COMPANY NAME _____ TELEPHONE _____
_____ START _____ END _____
ADDRESS _____ DATES EMPLOYED _____
_____ START _____ END _____
NAME OF SUPERVISOR _____ WAGES _____
_____ _____
NAME OF POSITION OCCUPIED _____ REASON FOR LEAVING _____

2. _____
COMPANY NAME _____ TELEPHONE _____
_____ START _____ END _____
ADDRESS _____ DATES EMPLOYED _____
_____ START _____ END _____
NAME OF SUPERVISOR _____ WAGES _____
_____ _____
NAME OF POSITION OCCUPIED _____ REASON FOR LEAVING _____

3. _____
COMPANY NAME _____ TELEPHONE _____
_____ START _____ END _____
ADDRESS _____ DATES EMPLOYED _____
_____ START _____ END _____
NAME OF SUPERVISOR _____ WAGES _____
_____ _____
NAME OF POSITION OCCUPIED _____ REASON FOR LEAVING _____

4. _____
COMPANY NAME _____ TELEPHONE _____
_____ START _____ END _____
ADDRESS _____ DATES EMPLOYED _____
_____ START _____ END _____
NAME OF SUPERVISOR _____ WAGES _____
_____ _____
NAME OF POSITION OCCUPIED _____ REASON FOR LEAVING _____

May we contact the previous employers for references? _____

Indicate those you do not want us to contact and the reason: _____

PLEASE LIST ALL SCHOOLS ATTENDED:

	Name & Location of School	# Of Years Attended	Graduated? Yes/No
High School			
College Or University			
Others: (Specify)			

Other Accomplishments (Please list below any other job related accomplishments, professional distinctions, certifications, or verifiable volunteer work.): _____

List Those Persons Willing To Provide Personal And/Or Professional References. (Name, Address, And Phone #)

1. _____
2. _____
3. _____

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal and that my employment is dependent on truthful answers to the foregoing inquiries.

Campbell's Nurseries is formally committed to providing equal employment opportunities and will not discriminate against any employee or applicant because of race, color, religion, sex, age, national origin, disability, marital or veteran status.

In consideration of my possible employment, I agree to conform to the rules and regulations of Campbell's Nurseries and my employment compensation can be terminated, with or without cause, and with or without notice, at any time, at the option of either the company or myself. I understand that my employment with the company is not governed by any express or implied contract of employment, either written or oral.

Campbell's Nurseries is committed to a workplace free of drugs & alcohol. I understand that my employment at Campbell's Nurseries is conditional upon passing a drug and/or alcohol screen.

Date: _____ Signature: _____