

Application for Employment

| 5625 Pine Lake Road2342 South 40th StreetLincoln, NE 68516Lincoln, NE 68506 | | | | | Date: | | |
|---|---|-----------------|--|-----------------------------------|---------------------------|----------------|-------------|
| Name <u>:</u> | | | | | | | |
| | First | | Middle | | | Last | |
| Current Addres | ss: | Street | | | | | 7: |
| | | | | City | | | Zip |
| Telephone Nur | nber: () | | | Email Addre | ess: | | |
| Are you availat | ole for full time | work (Includin | g weekends if ne | ecessary)? | YES | D NO | |
| What hours are you available to work? | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
| <u>Position(</u> | (s) Desired | <u>1</u> | | | | | |
| Container | Production | l | Cashier/Custo | omer Service Re | ep. 🗆 Ot | her: | |
| Field Prod | □ Field Production □ Courtesy Personnel | | | | | | |
| Landscape | Landscape Crew Delivery/Nursery | | | | | | |
| Landscape | e Crew Foremar | l I | Greenhouse | | | | |
| Landscape | e Designer | l | Horticulturist/ | Sales Personne | el | Wage Expected | d (minimum) |
| Landscape | e Design Draftsı | man | Giffice | | | | |
| After Reviewin Functions Of T | g The Job Desc he Position? | ription, Is The | stand The Requi re Any Basis On NO I | Which You Wou f Yes, Please Ex | uld Not Be Able xplain | To Perform The | e Essential |
| Drivers License #: | | | | | | | |
| | | | oked? | | | | |
| If Any, What C | Convictions For N | Moving Violatic | ons Have You Re | ceived Within T | The Past Three \ | /ears? | |
| If Any, What C | Convictions Have | e You Received | OTHER than tra | affic violations? | | | |
| | (Convic | tion of a crime | will not automa | tically disqualify | you from emp | loyment) | |
| Are You At Lea | ast 18 Years Of | Age? | | Can You S | Show Proof Of A | ge Upon Hire?_ | |
| If You Are Und | der 15 Years Of | Age, Can You | Produce A Work | Permit? | | - | |
| - | | | The United State | | | | |
| How Were You | ur Referred To T | This Position?_ | | | | | |

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

EMPLOYMENT HISTORY

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

| COMPANY NAME | | TELEPHONE |
|-------------------------------|-------|--------------------|
| | START | END |
| ADDRESS | | DATES EMPLOYED |
| | START | END |
| NAME OF SUPERVISOR | | WAGES |
| NAME OF POSITION OCCUPIED | | REASON FOR LEAVING |
| | | |
| COMPANY NAME | | TELEPHONE |
| | START | FND |
| ADDRESS | 0// | DATES EMPLOYED |
| | START | END |
| NAME OF SUPERVISOR | | WAGES |
| NAME OF POSITION OCCUPIED | | REASON FOR LEAVING |
| | | |
| COMPANY NAME | | TELEPHONE |
| | START | END |
| ADDRESS | | DATES EMPLOYED |
| | START | END |
| NAME OF SUPERVISOR | | WAGES |
| NAME OF POSITION OCCUPIED | | REASON FOR LEAVING |
| | | |
| COMPANY NAME | | TELEPHONE |
| | START | END |
| ADDRESS | | DATES EMPLOYED |
| | START | END |
| NAME OF SUPERVISOR | | WAGES |
| NAME OF POSITION OCCUPIED | | REASON FOR LEAVING |

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:_____