



2011 Employment Application

PERSONAL INFORMATION

NAME:

ADDRESS:

CITY: STATE: ZIP CODE:

DATE OF BIRTH: HOME PHONE:

CELL PHONE: EMAIL ADDRESS:

MN DRIVER'S LICENSE NUMBER:

IS YOUR DRIVER'S LICENSE CURRENT?: YES or NO

POSITION YOU ARE APPLYING FOR:

IF YOU ARE HIRED WHEN ARE YOU AVAILABLE TO START?:

ARE YOU AVAILABLE TO WORK WEEKENDS?: YES or NO

ARE YOU AVAILABLE TO WORK INTO THE EVENING?: YES or NO

EXPECTED HOURLY WAGE: \$

IF EMPLOYED, WILL YOU AGREE TO GO THROUGH A CONTROLLED SUBSTANCE TEST?:

YES or NO

EDUCATION HISTORY

Please state the institution attended and qualifications attained in the space provided below.

Application is continued on the other side



EMPLOYMENT HISTORY			
NAME OF EMPLOYER	POSITION	PHONE NUMBER	DATE(S) OF EMPLOYMENT

EMERGENCY CONTACT INFORMATION

NAME:

RELATIONSHIP:

HOME PHONE:

CELL PHONE:

EMAIL ADDRESS:

SIGNATURE

SIGNATURE:

TODAY'S DATE:

Thank you for your interest in employment with Thunder Lake Lawn Service. We will review your qualifications and contact you to set up an interview if we feel they meet our current staffing needs. If you have any questions or concerns please do not hesitate to contact us.

Local: 218.566.3456 Toll Free: 888.312.5296 Fax: 218.566.3814
 office@thunderlakelawnservice.com www.thunderlakelawnservice.com