

14189 VFW Road - Pekin, IL
Ph. (309)346-6090 FAX (309)346-8155

Old Heritage

Garden Center, Inc.

email: ohl@grics.net
www.oldheritagegardencenter.com

Position Desired

- Garden Center Sales Plant Production Delivery Driver
 Skid Loader Operator Snow Removal & Ice Control Other: _____

Personal Information

(Please notify us of any change of address or phone number.)

| | | | |
|--|-----------------|--------------------------|--------|
| Last Name: | | First Name: | |
| Street Address: | | Apt. No.: | |
| City: | | State/Zip: | |
| Home Phone: () | | Alternate Phone: () | |
| Social Security No. (Voluntary): | | Email Address: | |
| Do you currently possess a valid Driver's License? <input type="checkbox"/> Yes <input type="checkbox"/> No | License Number: | Exp. Date: | Class: |

| | | |
|---|--|-------------------------------|
| Best time to contact you at home: | Earliest date available for work: | Desired Salary Range: |
| You are available to work: () Full Time () Part Time () Temporary | Indicate Shift: () Morning () Afternoon () Evening | Any days / dates unavailable: |
| If you are under age 18, can you provide proof of eligibility to work? | | () Yes () No |
| Have you ever filed an employment application with us before? If yes, give date: | | () Yes () No |
| Have you ever been employed with us before? If yes, give date: | | () Yes () No |
| Do any of your friends or relatives (other than spouse) work here? If yes, specify name & relationship: | | () Yes () No |
| Are you currently employed? | | () Yes () No |
| May we contact your present employer? | | () Yes () No |
| Are you currently on "lay-off" status and subject to recall? | | () Yes () No |
| Are you able to travel if the job requires it? | | () Yes () No |

14189 VFW Road - Pekin, IL
Ph. (309)346-6090 FAX (309)346-8155

Old Heritage

Garden Center, Inc.

email: ohl@grics.net
www.oldheritagegardencenter.com

Education & Training

| Name of School | Location | Did you graduate? | |
|---|----------|-------------------|-----------------|
| High School: () Yes () No () GED or equivalent | | | |
| Name of School | Location | Degree / Major | Units Completed |
| College / University: | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Trade / Business School: | | | |
| | | | |

Most Recent Employer

List your most recent experience first and account for all experience during the last 10 years including U.S. Military Service and / or volunteer experience. List each change in title or promotion separately. Attach additional pages if needed. You may a

| | | | |
|---------------------|---------------|-----------------------------|------------|
| Name of Employer: | | Job Title: | |
| Supervisor's Name: | | Supervisor's Phone: () | |
| Street Address: | | City: | State/Zip: |
| From (Mo./Yr.): | To (Mo./Yr.): | Hours per week: | Salary: |
| Duties performed: | | | |
| | | | |
| | | | |
| Reason for leaving: | | | |

14189 VFW Road - Pekin, IL

Old Heritage

email: ohl@grics.net

Second Most Recent Employer

| | | | |
|---------------------|--------------|-----------------------------|------------|
| Name of Employer: | | Job Title: | |
| Supervisor's Name: | | Supervisor's Phone: () | |
| Street Address: | | City: | State/Zip: |
| From (Mo./Yr.): | To (Mo./Yr.) | Hours per week: | Salary: |
| Duties performed: | | | |
| | | | |
| Reason for leaving: | | | |

Third Most Recent Employer

| | | | |
|---------------------|--------------|-----------------------------|------------|
| Name of Employer: | | Job Title: | |
| Supervisor's Name: | | Supervisor's Phone: () | |
| Street Address: | | City: | State/Zip: |
| From (Mo./Yr.): | To (Mo./Yr.) | Hours per week: | Salary: |
| Duties performed: | | | |
| | | | |
| Reason for leaving: | | | |

Agreement

Agreement of Applicant: I certify that the statements in this application and accompanying materials are true, complete and correct to the best of my knowledge, and understand that misrepresentation or deliberate omission of fact may subject me to disqua

Signature

Date

MVR Check - Required for all applicants.

(If this section is not filled out the application will not be considered.)

| | | | |
|--|--|----------------------|-----|
| Last Name: | | First Name: | MI: |
| Street Address: | | | |
| City: | | State/Zip: | |
| Social Security No. (Voluntary): | | Drivers License No.: | |
| Date of Birth: | | | |
| <i>I hereby give permission for Old Heritage Garden Center, Inc. to check my drivers record.</i> | | | |
| Signature: | | Date: | |

FOR OFFICE USE ONLY

| | | |
|------------------|-------------|------------|
| Interview Notes: | | |
| | | |
| | | |
| Neatness: | Character: | |
| Personality: | Ability: | |
| Hire Date: | Position: | |
| Start Date: | Shirt Size: | Wage Rate: |