Eagle Lawn and Landscape Inc. Employment Application

3408 North Potsdam Ave., Sioux Falls, S.D., 57104, 605-366-1111

How were you referred to us?	Position applied for:		
Full Name:			
Address:			
Phone:	Cell:		E-mail:
Birth Date:		Wage Requirement:	
Date available to start:	Do you have an end date? (ie,School)		
Presently Employed?	Reliable Tra	Reliable Transportation?	
Do you have a Turf Pesticide Applicat	tors License?		
Are you available to work late or eve	nings if needed?		
How many hours do you expect to w	ork per week?		
Have you worked for this company b	efore?	If yes, when?	
Are you able to physically perform the functions of this position?			
Are you a citizen of the US?			
If not, are you legally allowed to wor	k in the US?		
Type of employment desired: Full Time, Part Time, Seasonal			
Have you ever pleaded guilty or been convicted of a crime?			
If so give dates and details:			
Answering yes to these questions do Date of the offense, seriousness and will be considered.			
Valid Drivers License?	DL#		State:
List driving citations over the past fiv	e years:		
DUI's			
Education after high school:	(over)		