Washington Greenhouse Application for Employment

	Name:						
	Address:						
	City:	Zip Code:					
	Phone:						
	Email:						
	Do you have a valid license?						
	Are you at least 16 years of age?						
	Have you applied here before? Date?						
	Type of employment desired:	□ Full Time □ Part Time □ Seasonal					
	Can you work Saturdays and Sundays?	□ Yes □ No					
	Are you on lay-off and subject to recall?	□ Yes □ No					
	Employm	ent History					
Emplo	oyer:	Dates Employed	Comments:				
Addre	ess:	From To					
Phone	e:		_				
Job Title:		Wages: Starting					
lmme	diate Supervisor & Title:						
Reason for Leaving:		Wages: Ending					
May we contact reference? ☐ Yes ☐ No ☐ Later							
iviay v	we contact felerence: Tes No Later						
			T.				
Employer:		Dates Employed	Comments:				
Address:		From To					
Phone:		Wages: Starting					
Job Title: Immediate Supervisor & Title:		wages: Starting					
IIIIIII	diate supervisor & Title.		V				
Reason for Leaving:		Wages: Ending					
May	we contact reference? ☐ Yes ☐ No ☐ Later	ĺ					

Edu	cational Background							
	ist last three schools attended, start ndicate degree or diploma earned,	_			-			
	A. School	B. Years	C. Degree/ Diploma	D. Majo	D. Major/Minor			
	List name and telephone num related and who are not previ personal references who are	ous supervi	sors. If not ap					
	Name		Phone (with Area Code)		Years Known			
	List any experience operating equipment – e.g., forklift, mower, tractor:							
	What experience do you have in providing customer service?							
	List any gardening experience you have:							
		n						
	List any possible scheduling conflicts – e.g., classes, after school activities, church:							
					- d			
	Signature of Applicant:				Date:			