

Application for Employment
PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS AND BACKGROUND CHECKS MAY BE RUN. PLEASE PRINT and COMPLETE ALL PAGES

Submit your application via e-mail, mail, fax or in person to: SILVER MIST GARDEN CENTER- N2270 Hwy. 22, Waupaca, WI 54981 FAX- (715) 258-5404

DATE:	
Full Name:	
Present Ad	dress:
City:	State: Zip Code:
Date of Birt	h:
Telephone:	()
Position ap	plied for:
	s available to work c Days and times or type no preference:
How many	hours can you work weekly?
PHYSICAL	REQUIREMENTS
1.	Do you have the ability/stamina to work a minimum of 40 to 50 hours a week?  Type either Yes or No:
2.	Do you have the ability to exert well-paced mobility for periods of up to eight (8) hours in length? Type either Yes or No:
3.	Do you have ability to lift up to 80 pounds frequently? Type either Yes or No:
4.	Do you have any physical condition that would inhibit performing any physical tasks?
	If yes, please explain:
Employmer	nt desired:
Type full tin	ne part time or no preference:

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying. You may continue on the back or with an additional sheet.

## **EDUCATION/TRAINING**

Name of High School:	Did you Graduate?		
Full Address of High School:			
Name of College:			
Full Address of College:			
Number of Years Completed: Degree and Major:			
Name of Business/Trade School:			
Full Address of School:			
Number of Years Completed: Degree and Major:			
Name of Professional School:			
Full Address of School:			
Number of Years Completed: Degree and Major:			
Name of Provider of Other Relevant Training:			
Full Address of School/Organization, etc.:			
Number of Years Completed: Degree and Major:			
HAVE YOU EVER BEEN CONVICTED OF A CRIME? Type either	Yes or No:		
If yes, explain number of conviction(s), nature of offense(s) leading offense(s) was/were committed, sentence(s) imposed, and type(s)			
DO YOU HAVE A DRIVER'S LICENSE? Type either Yes or No: _			
What is your means of transportation to work?			

Driver's license #		State of issue:
Expirat	ion date:	
List any	y special ce	rtifications such as Commercial (CDL) or Chauffeur:
Have y	ave you had any accidents during the past three years? Type either Yes or No:	
If Yes,	how many?	
Have y	ou had any	moving violations during the past three years? Type either Yes or No:
If yes, I	now many?	
Please		erences other than relatives or previous employers.
1.	Name	
	Position _	
	Company	
	Address _	
	Telephone	. ()
2.	Name	
	Position _	
	Company	
	Address _	
	Telephone	. ()

## **WORK EXPERIENCE**

Please list your work experience for the **past five years** beginning with your most recent job held. If you were self-employed, give firm name. **Attach additional sheets if necessary.** 

Name of Employer:	
Full Address of Employer:	
Phone number of Employer:	
Mo/Yr Employed from:	Mo/Yr Employed through:
Your Most Recent Title:	Rate of Pay:
Name of Supervisor:	
Reason for leaving (be specific):	
List the jobs you held, duties performed,	skills used or learned, advancements or promotions while you
worked at this company:	
Name of Employers	
Phone number of Employer:	
Mo/Yr Employed from:	Mo/Yr Employed through:
Your Most Recent Title:	Rate of Pay:
Name of Supervisor:	
Reason for leaving (be specific):	
List the jobs you held, duties performed,	skills used or learned, advancements or promotions while you
worked at this company:	

Name of Employer:	
Full Address of Employer:	
Phone number of Employer:	
Mo/Yr Employed from:	Mo/Yr Employed through:
Your Most Recent Title:	Rate of Pay:
Name of Supervisor:	
Reason for leaving (be specific):	
List the jobs you held, duties performe	ed, skills used or learned, advancements or promotions while you
worked at this company:	
Name of Employer:	
Full Address of Employer:	
Phone number of Employer:	
Mo/Yr Employed from:	Mo/Yr Employed through:
Your Most Recent Title:	Rate of Pay
Name of Supervisor:	
Reason for leaving (be specific):	
List the jobs you held, duties performe	ed, skills used or learned, advancements or promotions while you
worked at this company:	

Name of Employer:	
Full Address of Employer:	
Phone number of Employer:	
Mo/Yr Employed from:	Mo/Yr Employed through:
Your Most Recent Title:	Rate of Pay:
Name of Supervisor:	
Reason for leaving (be specific):	
List the jobs you held, duties performe	ed, skills used or learned, advancements or promotions while you
worked at this company:	
Name of Employer:	
Full Address of Employer:	
Phone number of Employer:	
Mo/Yr Employed from:	Mo/Yr Employed through:
Your Most Recent Title:	Rate of Pay:
Name of Supervisor:	
Reason for leaving (be specific):	
List the jobs you held, duties performe	d, skills used or learned, advancements or promotions while you
worked at this company:	

May we contact your present employer? Type either Yes or No:
Essay- On a separate sheet of paper, please answer each of the following questions with a brief essay ( 300 words or less) and submit with this application. 1. Tell us about yourself (in relation to this position)
2. What did you like and dislike about your previous job?
3. Why should we add you to the Silver Mist team?
4. Describe your key strengths.
5. Why did you apply for this position?
6. Describe the skills and experience you have which make you a good fit for this position.
I hereby certify and affirm that the information contained in this application and all supplemental attachments is true, complete and correct. I understand that false or misleading statements or the omission of important information made on this application or any time during the pre-hiring process may disqualify me from employment or subject me to immediate dismissal if hired.  By signing this application, I authorize Silver Mist, LLC to investigate my employment background and qualifications and perform a check of criminal convictions, and I authorize my previous employers to release to Silver Mist, LLC, information concerning my previous employment, education, training, experience and job performance and any other pertinent information concerning my professional competence, ethics and qualifications for employment.
Signature Date