Applicant's Name:

ALL sections should be completed ENTIRELY
You MUST have a valid ID to submit with this application Once
you complete this application submit to:

WynnLawnServices@gmail.com **OR** 506 Leon Sullivan Way Charleston, WV 25314

Applicant Information							
Full Name:					Dat	re:	
	Last	First			M.I.		
Address:							
_	Street Address				Apartment/l	Unit #	
-	City				State	ZIP Code	
Phone: ()	E-	mail Addres	ss:			
Date Availab		cial Security :			Desired Salary:	\$	
Position App	lied for:						
Are you a cit	zizen of the United States?	YES NO	If no, are	you aut	horized to work in th		NO
YES NO Have you ever worked for this company?				en?			
YES NO Have you ever been convicted of a felony? Date of Birth:							
If yes, expla	in:						
Do you have a current driver's license? Driver's license state/number: /							
		Ec	lucation				
High School:		Addres	s:				
From:	To:	Did you graduat	e? YES	NO	Degree:		
College:		Addres	s:				
From:	To:	Did you graduat	e? YES	NO	Degree:		
Other:		Addres	s:				
From:	To:	Did you graduate	e? YES	NO	Degree:		

Please list three refere	ences. At least tw	o must be academic or professional	'.		
Full Name:		Relationship:	Phone:	()	
Company:					
Address:					
Full Name:		Relationship:	Phone:	()	
Company:					
Address:					
Full Name:		Relationship:	Phone:	()	
Company:					
Address:					
		Previous Employment			
Company:			Phone:	()	
Address:			Supervisor:		
Job Title:		Starting Salary: \$		Ending Salary:	\$
Responsibilities:					
From:	To:	Reason for Leaving:			
May we contact your բ			10		
May we contact your p	revious supervis	or for a reference?			
Company:			Phone:	()	
Address:			Supervisor:		
Job Title:		Starting Salary: \$		Ending Salary:	\$
Responsibilities:					

From:	To:	Reason for Leaving:				
May we contact your pre	evious supervisor for a	YES a reference?	NO			
Company:			Phone	: ()		
Address:		Supervisor:				
Job Title:		Starting Salary:	\$	Ending Salary: \$		
Responsibilities:						
From:	To:	Reason for Leaving:				
May we contact your previous supervisor for a reference? YES NO						
		Disclaimer and Sig	gnature			
Wynn Lawn Services, LLC is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications. I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.						
I acknowledge that this job may require random drug testing. (Initial):						
Signature:				Date / /		