

McCAMMON'S IRISH MARKET

620 Treybourne Drive

Greenwood, IN 46142

317-885-8707

McCammmon's Irish Market is an equal opportunity employer. This application will not be used for limiting or excluding any application from consideration for employment on a basis prohibited by local, state or federal law. Should an applicant need reasonable accommodation in the application process, he or she should contact a company representative.

PLEASE FILL OUT ALL OF THE SECTIONS BELOW:

APPLICANT INFORMATION

Applicant Name: _____

Address: _____

City, State and Zip Code: _____

Telephone Number: _____

EMPLOYMENT:

Position Applying For: _____

How did you hear about the position? _____

What days are you available for work? _____

If needed, are you available to work overtime? _____

What date would you be available to start? _____

Salary desired? _____

PERSONAL INFORMATION:

Are you 18 years of age or older? YES or NO

Are you a U.S. Citizen or approved to work in the United States? YES or NO

What documents can you provide as proof of citizenship or legal status?

Will you consent to a mandatory controlled substance test? YES or NO

Do you have any condition which would require job accommodations? YES or NO

If yes, please describe accommodations required below:

(Note: McCammmon's Irish Market complies with the ADA and considers reasonable accommodations measures that may be necessary for eligible applicants/employees to perform essential functions.)

EDUCATION & TRAINING:

Name **Location: City & State** **Year Graduated** **Degree Earned**

High School:

College/University:

Vocational School / Specialized Training:

MILITARY:

Are you a member of the Armed Services?

What branch of military did you enlist?

What was your military rank when discharged?

How many years did you serve in the military?

What military skills do you possess that would be an asset for this position?

PREVIOUS EMPLOYMENT:

Employer Name:

Job Title:

Supervisor Name:

Employer Address:

City, State and Zip:

Telephone:

Dates Employed:

Reason for Leaving:

PREVIOUS EMPLOYMENT:

Employer Name: _____
Job Title: _____
Supervisor Name: _____
Employer Address: _____
City, State and Zip: _____
Telephone: _____
Dates Employed: _____
Reason for Leaving: _____

PREVIOUS EMPLOYMENT:

Employer Name: _____
Job Title: _____
Supervisor Name: _____
Employer Address: _____
City, State and Zip: _____
Telephone: _____
Dates Employed: _____
Reason for Leaving: _____

REFERENCES:

Please provide two personal and professional references below:

| <u>Name</u> | <u>Contact Information / Number</u> |
|-------------|-------------------------------------|
| _____ | _____ |
| _____ | _____ |

ADDITIONAL INFORMATION:

Do you have any landscaping experience?

Do you have any previous garden center experience?

Do you have any retail experience?
