

NJM Property Management LLC

1741 Barber Street Sebastian, FL. 32958 Nimenterprisespm@gmail.com www.nimpropertymanagement.com

Employment Application

Applicant Information								
Full Name:							D.O.B.:	
	Last	Fir	st			M.I.	-	
Address:								
	Street Address						Apartment/Unit	#
	City					State	ZIP Code	
Phone:			E	Email				
Date Availal	ole:	Social Securi	ty No.:			Desire	ed Salary: \$	
Position App	olied for:							
						NO		
Have you ev	ver worked for this comp	yes pany? □	NO	If yes,	when?_			
Have you ev	ver been convicted of a	YES felony?	NO					
If yes, expla	in:							
			Educa	ation				
High School	l:		Address:					
From:	To:	Did you g	graduate?	YES	NO	Diploma:		
College:			Address:					
From:	To:	Did you (graduate?	YES	NO	Degree:		
Other:			Address:					
From:	To:	Did vou o	graduate?	YES	NO	Degree:		

			References						
Ple	ease list i	two professional references.							
Ful	I Name:			Relationship:					
Company:			D)						
Add	dress:								
Ful	l Name:			Relationship:					
Co	mpany:			Phone:					
Add	dress:								
		· ·	Previous Employ	ment					
Company:		Phone:							
Add	dress:			Supervisor:					
Job	Title:		Starting Salary:\$	Ending Salary:\$					
Res	sponsibili	ities:							
Fro		To:		on for Leaving:					
			Skill Set						
nui	mber of y		her skills that may b number which corn	e useful for the job you are seeking. Enter the esponds to your ability for each skill. (One					
1.	Lawn M	laintenance (Mow, Line Trim,	5.	:					
	Edge): YES NO			YES NO					
Years of experience:			Years of experience:						
	Ability o	or Rating: 1 2 3 4 5		Ability or Rating: 1 2 3 4 5					
2.	Tree Tri	imming: YES□ NO□	6.	:					
	Years o	of experience:		YES NO					
	Ability o	or Rating: 1 2 3 4 5		Years of experience:					
3.	Equipm	ent Operator: YES NO		Ability or Rating: 1 2 3 4 5					
	Years o	of experience:	7.	:					
	Ability o	or Rating: 1 2 3 4 5		YES NO					
4.	Crew Le	eader: YES NO		Years of experience:					
	Years o	of experience:							
Abi	ility or Ra	ating: 1 2 3 4 5							

	Military Service	
Branch:	From:	To:
Rank at Discharge:	Type of Discharge	:
If other than honorable, explain:		
Dis	claimer and Signature	
I certify that my answers are true and complet	te to the best of my knowledge.	
If this application leads to employment, I unde interview may result in my release.	erstand that false or misleading i	information in my application or
Signature:		Date: