

ARBORWORKS, LLC
Tree Care & Removal

Application for Employment

Application Date: ____/____/____

Personal Information

Full Name: _____ Nick Name: _____

Street Address: _____ Apartment/Unit#: _____

City: _____ State: _____ Zip: _____

Phone #'s: (H) _____ (W) _____ (C) _____

E-mail address: _____

Date of Birth: ____/____/____ Social Security # _____

Driving History

Drivers License #: _____ Exp. Date: ____/____/____

•Do you have a drivers License? Y N •Do you have a CDL? Y N

•Do you have any points on your license? Y N •If yes, how many _____

•What were you cited for and when? _____

•Do you have your own reliable vehicle? Y N

•If No, how will you *reliably* get to work everyday? _____

Additional Information

•I certify that I am a U.S. citizen or a permanent resident authorized to work in the United States. Y N

•Have you ever been convicted of, or entered a plea of guilty, no contest, or had a withheld judgment to a felony? Y N •If Yes, Please explain: _____

•Can you take a drug test today (and pass.) Y N

Background check

•I authorize Arborworks to request an investigative report from a background checking agency concerning my social security number, motor vehicle operation history, criminal history and other information to the extent permitted by law from appropriate local, state and federal agencies and other available public records.

•Please Sign: _____ Date: ____/____/____

Education • List school(s) you may have attended and what level you completed.

(1)

•School: _____ From: _____ To: _____

•Did you graduate? Y N •Type of Degree or Diploma: _____

(2)

•School: _____ From: _____ To: _____

•Did you graduate? Y N •Type of Degree or Diploma: _____

Experience

•If no experience, explain why you might desire this job. _____

•What experience do you have in the Tree Care Industry? _____

•Are you familiar with spike less climbing and what it's for? Y N

•If yes, explain. _____

Certifications • Circle any certifications or training that apply.

•CPR/1st Aid• •Certified Arborist• •Certified Tree Worker•

•Certified Tree Care Safety Professional• •Aerial Rescue Training• •Driving School•

•Other _____

Previous Employers • List all employers you've worked for in the last 5 years starting w/ the most recent.

•Start date (month/year): _____/_____/_____ •Leave date (month/year) _____/_____/_____

•Company Name: _____ •Employer/Supervisor: _____

•Phone #: _____ •Location: _____

•Job Title: _____ •Hours per week? _____

•Explain some of your duties/responsibilities: _____

•Reason For Leaving? _____

•May we contact this employer as a reference? Y N

•Start date (month/year): _____/_____/_____ •Leave date (month/year) _____/_____/_____

•Company Name: _____ •Employer/Supervisor: _____

•Phone #: _____ •Location: _____

•Job Title: _____ •Hours per week? _____

•Explain some of your duties/responsibilities: _____

•Reason For Leaving? _____

•May we contact this employer as a reference? Y N

•Start date (month/year): _____ / _____ •Leave date (month/year) _____ / _____

•Company Name: _____ •Employer/Supervisor: _____

•Phone #: _____ •Location: _____

•Job Title: _____ •Hours per week? _____

•Explain some of your duties/responsibilities: _____

•Reason For Leaving? _____

•May we contact this employer as a reference? Y N

References • Please list any references you may have.

When can you start? _____ / _____ / _____ What hourly pay do you need? \$ _____

Notes/comments: _____

I certify that the above information is accurate and true.

Signature: _____ Date: _____

Print Name: _____