

Royal Crest Nurseries LLC
Applicants May Be Tested For Illegal Drugs

Date of Application: _____

Country where you were born _____ Birth Date _____

Name _____ Social Security Number _____

Physical Address _____ City _____

State _____ Zip Code _____ How long at this address? _____

Mailing Address if different from above _____

City _____ State _____ Zip code _____

Home Phone # _____ Alternate phone # _____

Are you legally authorized to work in the United States? Yes _____ No _____

Are you 18 years of age or older? Yes _____ No _____ if no, what is your age? _____

Are you able to work full time? Yes _____ No _____ if no, what hours are you available? _____

Have you ever been convicted of, or pled guilty to a crime? _____

If yes, explain the number of convictions, nature of offences leading to convictions, how recently such offences was/were committed, sentence imposed, and type of rehabilitations _____

BACKGROUND CHECKS ARE RUN ON ALL APPLICANTS.

Do you have a valid driver's license? Yes _____ No _____ If yes, issuing state _____

Driver's license number _____

Have you ever had your license, permit, or privilege to operate a motor vehicle suspended

Or revoked? Yes _____ No _____ If yes, details _____

Have you had any accidents during the past three years? Yes _____ No _____

If yes, how many? _____

Have you had any moving violations during the past three years? Yes _____ No _____

If yes, how many? _____

Education

Highest level completed (Please circle highest level completed.) 1 2 3 4 5 6 7 8 9 10 11 12

College 1 2 3 4 Business or Trade school _____ Professional school _____

Last school attended _____

Location _____ Degree attained _____

Office Skills

Typing? Yes _____ No _____ WPM _____

10-key? Yes _____ No _____

Personal computer? Yes _____ No _____

PC _____ Mac _____

Word processing? Yes _____ No _____ Other skills _____

Work Experience

Please list your work experience for the last 5 years beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets, if necessary.

Employer name _____ Address _____
City _____ State _____ Zip Code _____ Telephone _____
Employment Dates: From _____ To _____
Name of last supervisor _____ Pay or salary _____
Last job title _____ Skills or duties performed _____
Reason for leaving _____ Name used if different _____

Employer name _____ Address _____
City _____ State _____ Zip Code _____ Telephone _____
Employment Dates: From _____ To _____
Name of last supervisor _____ Pay or salary _____
Last job title _____ Skills or duties performed _____
Reason for leaving _____ Name used if different _____

Employer name _____ Address _____
City _____ State _____ Zip Code _____ Telephone _____
Employment Dates: From _____ To _____
Name of last supervisor _____ Pay or salary _____
Last job title _____ Skills or duties performed _____
Reason for leaving _____ Name used if different _____

May we contact your present employer? Yes _____ No _____

Please list 2 references other than relatives or previous employers.

Name _____ Telephone _____
Address _____
Company _____ Position _____

Name _____ Telephone _____
Address _____
Company _____ Position _____

The information provided in this application is true, correct, and complete. If employed, any misstatement or omission of fact on this application may result in dismissal.

Signature _____ Date _____