

Hoffman Lawn Care LLC

Grand Rapids, MI 49512

(616) 893-3503

Contact@HoffmanLawnCare.com

Employment Application

Applicant Information

Full Name: _____ Date: _____

Last *First* *M.I.*

Address: _____

Street Address *Apartment/Unit #*

City *State* *ZIP Code*

Phone: _____ Email: _____

Date Available: _____ Full Time or Part Time _____ Desired Salary: \$ _____

Position Applied for: _____

Are you a citizen of the United States? YES NO Do you have a valid driver's license? YES NO

Have you ever worked for this company? YES NO If no, why? _____

Have you ever been convicted of a felony? YES NO If yes, explain: _____

References

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO