



Application For Employment

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

(PLEASE PRINT)

Date _____

Position(s) Applied For		Email Address	
Last Name	First Name	Middle Name	
Address	City	State	Zip Code
Telephone Number(s)		Social Security Number	

Are you able to provide legal proof of eligibility to work in the United States?

Yes No

Have you been employed with a Ceres Company before?
(i.e. Land Designs, A Cut Above Forestry)

Yes No

If yes, please indicate the date. _____

Are you currently employed?

Yes No

May we contact your current employer?

Yes No

On what date are you available to work? _____

Have you been convicted of a felony within the last 7 years?

Yes No

Conviction will not necessarily disqualify application from employment.

If yes, please explain: _____

Education

	Name & Address of School	Course of Study	Years Completed	Diploma/Degree
High School				
Undergraduate College				
Other Training				

Language ability:

	Speak	Write
English		
Spanish		

Have you worked in the landscape industry previously?

Yes No

If yes, please list 3 main tasks/responsibilities you performed:

- 1.
- 2.
- 3.

Most positions with Ceres require driving a vehicle:

Do you possess a valid Colorado driver's license?

Yes No

Is your driving record clean?

Yes No

Have you had any moving violations in the last three years?

Yes No

If yes, please explain: _____

Employment Experience

Please start with your present or most recent position. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				

References

Name:	Name:
Address:	Address:
Phone:	Phone:
Name:	Name:
Address:	Address:
Phone:	Phone:

IN CASE OF EMERGENCY, PLEASE NOTIFY:

(NAME)

(ADDRESS)

(PHONE)

Applicant's Statement

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in order to arrive at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules, regulations and policies of the employer.

I have no limitations that would affect performing the essential functions of the position I have applied for.

Signature of Applicant

Date