



Adams Nurseries, 5799 Genesee Street, Lancaster, NY 14086



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, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For:		Date of Application	
How Did You Learn About Us?			
<input type="checkbox"/> Advertisement		<input type="checkbox"/> Friend	
<input type="checkbox"/> Walk-in		<input type="checkbox"/> Relative <input type="checkbox"/> Other _____	
Last Name		First Name	
		Middle Name	
Address		Number	
Street		City	
State		Zip Code	
Telephone Numbers			
Home:		Cell:	
		Other:	

Are you over 18 years of age? ☐ Yes ☐ No

If you are under 18 years of age, can you provide required proof of your eligibility to work? ☐ Yes ☐ No

Have you ever filed an application with us before? If Yes, give date _____ ☐ No

Have you ever been employed with us before? If Yes, give date _____ ☐ No

Are you currently employed? ☐ Yes ☐ No

May we contact your present employer? ☐ Yes ☐ No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? ☐ Yes ☐ No

****Proof of citizenship or immigration status will be required upon employment****

On what date would you be available for work? _____

Are you available to work: ☐ Full Time ☐ Part Time ☐ Shift Work ☐ Temporary

Are you currently on "lay-off" status and subject to recall? ☐ Yes ☐ No

Can you travel if a job requires it? ☐ Yes ☐ No

Do you object to weekend work? ☐ Yes ☐ No

Have you ever been convicted of a crime, violation or offence? ☐ Yes ☐ No

If yes, please explain _____

Is additional information relative to a change of your name, or your use of an assumed name or nickname necessary to enable us to check your work or education record? If yes, please explain _____ ☐ No

WE ARE AN EQUAL OPPORTUNITY EMPLOYER



Education



Are you presently a student? ☐ Yes ☐ No ☐ Full Time ☐ Part Time

	Elementary School				High School				College/University				Graduate/Professional			
School Name Location																
Years Completed	5	6	7	8	9	10	11	12	1	2	3	4	1	2	3	4
Diploma/Degree																
Describe Course of Study																
Describe any Honors you have Received																

Indicate any foreign languages you can speak, read and/or write			
	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

Describe any specialized training, apprenticeship, skills, hobbies or extra-curricular activities.

Describe any job related training received in the United States Military.



Employment Experience



Start with your present or last job. 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.

1.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number		Hourly Rate/Salary		
			Starting	Final	
	Job Title	Supervisor			
	Reason for Leaving				May we contact your supervisor? Yes No
2.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number		Hourly Rate/Salary		
			Starting	Final	
	Job Title	Supervisor			
	Reason for Leaving				May we contact your supervisor? Yes No
3.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number		Hourly Rate/Salary		
			Starting	Final	
	Job Title	Supervisor			
	Reason for Leaving				May we contact your supervisor? Yes No
4.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number		Hourly Rate/Salary		
			Starting	Final	
	Job Title	Supervisor			
	Reason for Leaving				May we contact your supervisor? Yes No

If you need additional space, please continue on a separate sheet of paper.

Please list three references that we may contact: (not related to you & not a previous employer)		
1. Name		Address
Phone	Relationship	Years Known
2. Name		Address
Phone	Relationship	Years Known
3. Name		Address
Phone	Relationship	Years Known



Applicant's Statement



I certify that 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 arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 60 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.

Adams Nurseries has an "employment-at-will" relationship with its employees. This means that as a member of the staff, you are free to leave Adams Nurseries at any time, with or without reason and that the company has the same right to end its employment relationship with you.

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

Signature of Applicant

Date

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview ☐ Yes ☐ No

Remarks _____

HIRED ☐ Yes ☐ No

Start Date of Employment _____

INTERVIEWER

DATE

Hourly Rate/

Job Title _____

Salary _____ Department _____

By _____

NAME AND TITLE

DATE

NOTES _____

