

WINDY TREE, INCORPORATED

Employment Application

APPLICANT INFORMATION

Last Name		First		M.I.	Date
Street Address				Apartment/Unit #	
City		State		ZIP	
Phone		E-mail Address			
Date Available		Social Security No.		Desired Salary	
Position Applied for					
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>	
Have you ever worked for this company?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?	
Have you ever been convicted of a felony?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain	
Are you willing to relocate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, explain	

EDUCATION

High School		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

REFERENCES

Please list two professional references of people to whom you are not related and by whom you have not been employed.

Full Name		Relation / Position	
Company		Phone ()	
Full Name		Relation / Position	
Company		Phone ()	
Full Name		Relation / Position	
Company		Phone ()	

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PREVIOUS EMPLOYMENT				
Company			Phone ()	
Address			Supervisor	
Job Title		Starting Salary \$	Ending Salary \$	
Responsibilities				
From	To	Reason for Leaving		
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>				
Company			Phone ()	
Address			Supervisor	
Job Title		Starting Salary \$	Ending Salary \$	
Responsibilities				
From	To	Reason for Leaving		
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>				
Company			Phone ()	
Address			Supervisor	
Job Title		Starting Salary \$	Ending Salary \$	
Responsibilities				
From	To	Reason for Leaving		
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>				
Company			Phone	
Address			Supervisor	
Job Title		Starting Salary \$	Ending Salary \$	
Responsibilities				
From	To	Reason for Leaving		
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>				

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PRODUCTION SKILLS

Tree Climber Bucket Truck Chipper Chain Saw Ground Worker Other:

Do you have practical experience in Electrical Line Clearance Tree Trimming? YES NO

Please describe any vegetation related training and experience:

DRIVING SKILLS

Check all those that you have experience operating.

Automatic Transmission Manual Multi-Speed Transmission Truck and Chipper Bucket Truck Other:

Vehicle accident record for past 3 years or more (attach sheet if more space is needed)
Driving positions only, do not disclose your own injuries

Date	Nature of Accident (Head-on, Rear-End, etc.)	Injuries to Others
Last Accident:		
Next Previous:		
Next Previous:		

Federal DOT regulations require checks on all drivers
Traffic Convictions for the past 3 years (other than parking violations)
Driving Positions Only

Conviction	Date	Charge	Penalty

(Attach sheet if more space is needed)

A. Have you ever been denied a license, permit or privilege to operate a motor vehicle? YES NO

B. Has any license, permit or privilege ever been suspended or revoked? YES NO

If the answer to A or B is yes, attach a statement giving details.

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ABILITY TO PERFORM ESSENTIAL FUNCTIONS OF THE JOB

All production positions are physically demanding. Entry-level employees in these positions are expected, within a reasonable time after they commence employment, to be able to do tree work. This work includes climbing trees and removing tree limbs using various hand and power tools on a continuous basis during regular to extended work hours; removing and disposing of tree limbs using various mechanized tools, which can require lifting and carrying 50 – 100 pound loads. Are you physically able to safely perform these job duties with or without reasonable accommodation?

YES NO

DISCLAIMER AND SIGNATURE

I certify that the information contained in this application is correct to the best of my knowledge and understand that falsification of this information may result in refusal to hire or, if hired, dismissal. I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, or any other information they might have, personal or otherwise, with regard to any of the subjects covered by this application and release all such parties from all liability for any damage that might result from furnishing such information to you. I authorize you to request and receive such information, in the process of my being considered for employment by your company. I agree to conform to the guidelines of the company and acknowledge that these guidelines may be changed, interpreted, withdrawn, or added to by your company's sole option and without any prior notice to me. I further acknowledge that my employment may be terminated, and any offer of employment, if such is made, may be withdrawn, with or without cause, and with or without any prior notice at any time, at the option of the company or myself. I understand that no representative of the company had any authority to enter into any agreement for employment for any specified period of time, or assure or make some other personnel move, either prior to or after commencement of employment or make any agreement contrary to the foregoing unless in writing, signed by the president of the company. I understand that any handbook or memorandum or other writing given to me shall not constitute an express or implied contract of employment.

Signature

Date

