

# job application form



## Personal Information:

*\*Items marked with an asterisk*

*(\*) are optional, but required upon hire.*

Name		Birthdate*		Social Security Number*	
Permanent Street Address			City		State   Zip
Current Street Address			City		State   Zip
Email		Home Phone		Mobile Phone	
Who can we contact in case of emergency?*			Relationship to you?		Phone
Address			City		State   Zip
Are you married?*		Are you currently attending school?			Do you buy flowers?*
Yes _____ No _____		Yes _____ No _____			Yes _____ No _____
What's your favorite school subject or work activity and why?		What is something you like to do outside of work or school?		What music group/singer do you like -or- what type of art/artist do you like and why?	
Are you involved or volunteer with any organizations?			What skills or character qualities do you offer?		
If you had one free weekend and money wasn't an object, what would you do?					

## Education Information:

	School Name, City, and State	Course of Study/Major	Graduated	Degree Received
High School			Yes [ ] No [ ]	
College			Yes [ ] No [ ]	
Other			Yes [ ] No [ ]	

## Work Availability and Experience *(Saturday & Sunday availability is required for rotation):*

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From:							
To:							
Total hours per week you are available to work:				Work Experience:			
If hired, will you be able to work overtime? Yes ___ No ___				FLORAL INDUSTRY EXPERIENCE? YES ___ NO ___			
What method will you use to get to work?				FLOWER SHOP EXPERIENCE? YES ___ NO ___			
				Wage desired _____ Position desired: _____			

# job application continued



## WORK HISTORY:

In the following space provided, please fill out pertinent work history

Company Name		Supervisor's Name		Work Dates: from when to when?	
Address (optional)			City		State
Phone Number		May we contact your supervisor for a reference? Yes___ No___		Starting Wage: Ending Wage:	
Job Title/Duties			Reason for leaving		

Company Name		Supervisor's Name		Work Dates: from when to when?	
Address (optional)			City		State
Phone Number		May we contact your supervisor for a reference? Yes___ No___		Starting Wage: Final Wage:	
Job Title/Duties			Reason for leaving		

Company Name		Supervisor's Name		Work Dates: from when to when?	
Address (optional)			City		State
Phone Number		May we contact your supervisor for a reference? Yes___ No___		Starting Wage: Final Wage:	
Job Title/Duties			Reason for leaving		

## Personal References

List three individuals able to give character references. You should include former employers or school administrators, but **not** your relatives.

Name and Occupation	How do you know them, and for how long?	Phone Number

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**READ CAREFULLY:** I certify that the information contained in this application is correct to the best of my knowledge and understand that any misstatement or omission of information may result in denial of employment or discharge. I authorize the references that I listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you

Signature \_\_\_\_\_ Date \_\_\_\_\_