



# Application for Employment

All qualified applicants will receive consideration without regard to race, color, creed, religion, sex, national origin, age, disability, marital or veteran status, or any other characteristic protected by state or federal law.

Iowa City Landscaping & Garden Center is an Equal Opportunity Employer

## Personal Information:

Name \_\_\_\_\_ Today's Date \_\_\_\_\_  
Last First Middle  
Current Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Do you have the legal right to work in the U.S. Yes No Are you under the age of 18? Yes No  
Have you applied for employment with Iowa City Landscaping in the past 12 months? Yes No  
Have you ever been employed by Iowa City Landscaping? Yes No If yes, when? \_\_\_\_\_

## Employment desired

Please check all areas of interest.

- ☐ **Retail**
- ☐ Cashier ☐ Nursery Lot - Sales, customer service ☐ Delivery, light planting ☐ Landscape Maintenance
- ☐ **Landscape Installation** - Must be able to lift 80 lbs.
- ☐ **Storage Nursery/Field Operations** - Watering, plant material care, some equipment operation

## Work related skills (list anything relevant to the job you are applying for)

Do you have a valid drivers license? ☐ Yes ☐ No You may be asked to sign a driving record release authorization

## Education

Last grade completed in high school: \_\_\_\_\_  
Name of School \_\_\_\_\_  
Years of college attended: \_\_\_\_\_ Graduated ? ☐ Yes ☐ No  
Current or last school attended: \_\_\_\_\_ Major/Area of study: \_\_\_\_\_  
Are you currently a student? ☐ Yes ☐ No  
List any other job-related education, certifications, or memberships \_\_\_\_\_

## Employment History - List below your last 3 employers, starting with the most recent

Date	Month/Year	Name, address, and phone number of employer	Salary/wage	Position	Reason for Leaving	May we contact this employer?
From						
To						
From						
To						
From						
To						

## References—Please provide the names of 3 business references, or individuals that are not related to you, that can comment on your work skills

Name	Phone	Years Known	Relationship
1.			
2.			
3.			

## Availability

Hours/number of days per week desired \_\_\_\_\_ Date available to start working \_\_\_\_\_

What is your desired starting wage? \_\_\_\_\_ Will be willing to work overtime if asked? \_\_\_\_\_

To help us consider you for a job that matches our needs, please fill out the hours that you are available to work. All employees of Iowa City Landscaping may be required to work at least one weekend day. If hired, the hours you have listed will be taken into consideration when scheduling. If you have any other potential conflicts in the foreseeable future, please list them:

Day	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From:							
To:							

How were you referred to Iowa City Landscaping & Garden Center?

## Application agreement - Please read carefully

*"By signing below, I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application may be grounds for dismissal.*

*I authorize investigation of all statements contained herein and the references listed above to give Iowa City Landscaping & Garden Center 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 this information.*

*I understand and agree that my employment is "at will", and can be terminated by myself or the company at any time without notice, consistent with state or federal law."*

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

Iowa City Landscaping & Garden Center  
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