

Country Arbors Nursery, Inc.

1742 County Road 1400 North

Urbana, IL 61802

Application For Employment

Federal, state and local laws prohibit discrimination in employment because of sex, age, race, color, religious creed, citizenship, marital status, national origin, ancestry, military status or disability.

COUNTRY ARBORS NURSERY RESERVES THE RIGHT TO CONDUCT PRE-EMPLOYMENT & RANDOM DRUG SCREENINGS

Today's Date: ____/____/____

PERSONAL

First Name: Middle Name: Last Name: _____

Address: _____ City: _____ State: _____ Zip: _____ Years At Address: _____

Home Phone Number (_____) Work Phone Number (_____) Other Contact Number (_____)

Who may we contact in case of an emergency?

Name: _____ Telephone : _____

How were you referred to us? Friend Employee Advertisement Other (Identify) _____

Are you 18 years of age or older? Yes No Are you 21 years of age or older? Yes No

Position Sought: _____ Rate Expected Per Hour: _____

Are you currently employed? Yes No If yes, why do you want to change jobs? _____

Does your employer know of your intent to change? Yes No May we contact him for a reference? Yes No

If employed by us, will you be employed by another company or self-employed? Yes No

If yes, please explain: _____

What Positions are you interested in? Nursery Greenhouse Retail Production (N ___ or GH ___) Landscape

If full-time employment is not acceptable, would you accept part-time or temporary work? Yes No

What days of the week are you available to work? Monday Tuesday Wednesday Thursday Friday Saturday Sunday

If you can work this day, identify hours: _____

Are you willing to work weekends? Yes No

If yes, what hours are you available? _____

Date you can start: _____ Are you presently on a layoff and subject to recall? Yes No

Are you either a citizen of the United States or a legal alien who has the right to remain permanently and work in the United States? (You will be required to produce proof of your right to work following a conditional offer of employment.) Yes No

Have you ever been employed by us? Yes No

If so, please state when and by what name (if different from above): _____

Do you have any friends or relatives employed by us? Yes No

If yes, please identify them. _____

Do you hold a valid drivers license? Yes No Do you hold a CDL License? Yes No If yes, what Class? _____

Drivers License # _____ Any tickets in the last five years? Yes No Number of Points Against License _____

Have you ever been discharged or requested to resign from a position? Yes No If yes, please explain: _____

Have you ever held a position of trust (handling money or confidential material)? Yes No

Job Skills And Experience

Manual Labor Field Work In Agriculture Operate Farm Equipment (Specify) _____

Mechanic/Repair Operate Skid Steer/Tractor Office/Administrative (Specify) _____

Digging Trimming (Trees, Shrubs, Etc. Propagation (Specify) _____

Retail Experience (Specify) i.e. Cashier, Sales, etc. _____

Landscape Experience (Specify) i.e. Planting, Edging, Walls, etc. _____

Cashier, Clerk And Administrative Positions

Can you consistently lift items weighing up to 50 pounds? Yes No Comment _____

Can you frequently bend, squat, reach, lift, carry, push and pull items when necessary for your job? Yes No

Can you work Fridays, Saturdays and/or Sundays if required by the job? Yes No

Landscape, Retail and Nursery Positions

Can you consistently lift items weighing up to 80 pounds? Yes No Comment _____

Can you frequently bend, squat, reach, lift, carry, push and pull items when necessary for your job? Yes No

Can you work Handling pesticides, herbicides, paint, solvents, etc.: Yes No

Do you have an applicator's license? Yes No Type: _____ License # _____ State: _____ Expiration Date: _____

All Positions

To be considered 'qualified under the Americans With Disabilities Act, an applicant must be able to perform the essential functions of a job with or without a reasonable accommodation. Please review the attached job description (or job description as described and documented) and application attachment and answer the following question:

Can you perform the essential functions of the position for which you have applied, with or without an accommodation by Country Arbors Nursery, Inc., Inc.? Yes No

Employment History (From Current Job To Past Jobs)

Company _____ From _____ To _____

Address: _____ Supervisor/Title: _____ Telephone # _____

Reason For Leaving: _____

Responsibilities: _____

What do you like/dislike about this job? _____

Company _____ From _____ To _____

Address: _____ Supervisor/Title: _____ Telephone # _____

Reason For Leaving: _____

Responsibilities: _____

What do you like/dislike about this job? _____

What do you like/dislike about this job? _____

Company _____ From _____ To _____

Address: _____ Supervisor/Title: _____ Telephone # _____

Reason For Leaving: _____

Responsibilities: _____

What do you like/dislike about this job? _____

What do you like/dislike about this job? _____

Company _____ From _____ To _____

Address: _____ Supervisor/Title: _____ Telephone # _____

Reason For Leaving: _____

Responsibilities: _____

What do you like/dislike about this job? _____

Education Information

Grade School Name: _____ City _____ State _____ Diploma? Yes No #Years _____

Major Courses/Certification _____

High School Name: _____ City _____ State _____ Diploma? Yes No # Years _____ or GED _____

Major Courses/Certification _____

Trade School Name: _____ City _____ State _____ Diploma? Yes No # Years _____

Major Courses/Certification _____

College Name: _____ City _____ State _____ Diploma? Yes No # Years _____

Major Courses/Certification _____

Personal References (Do Not List Family Members)

Name: _____ Address: _____ Telephone: _____ Relationship _____

Name: _____ Address: _____ Telephone: _____ Relationship _____

Name: _____ Address: _____ Telephone: _____ Relationship _____

Name: _____ Address: _____ Telephone: _____ Relationship _____

Country Arbors Nursery Important Notice To Applicants

Country Arbors Nursery has made a strong commitment to being a drug-free workplace. All job applicants being considered for employment at Country Arbors Nursery will undergo testing for the presence of illegal drugs as a condition of employment. Anyone confirmed to have a positive test result will be denied employment. Country Arbors Nursery, Inc. does not discriminate against applicants because of past history of drug abuse, therefore, any individual who fails a pre-employment drug test may initiate another inquiry after a period of no less than six months and present themselves as drug free.

I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate discharge from employer's service, whenever it is discovered.

I give the employer the right to contact and obtain information from all references, employers, motor vehicle records, and educational institutions and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability the employer and its representatives for seeking, gathering and using such information and all other persons, corporations or organizations for furnishing such information.

The employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state or federal law.

This application is current for only 45 days. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application.

This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of the employer, other than an authorized officer, has the authority to make any assurances to the contrary. I further understand that any such assurances must be in writing and signed by the President and CEO.

I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of that person's need for reasonable accommodation as required by the ADA.

I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Please read the following before submitting your application:

I am aware that all positions require reference checks, and that some positions require background checks and other pre-employment qualifications. 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. In the event of employment, I understand that falsification or omission of information in any application, interview(s), personnel forms or any other Country Arbors Nursery document may result in discharge. I also authorize the companies, schools, or persons named above to give any info regarding my employment, character and qualifications. I hereby release said companies, schools, or persons from all liability for any damage for issuing this information. I understand that it is policy of Country Arbors Nursery to provide equal opportunity and make all employment decisions without regard to race, color, age, sex, marital status sexual orientation, ancestry, religion, and national origin, citizenship, disability, or medical condition. However, I understand and agree that my employment, if hired, is for no definite period and may, regardless of the date of payment of any wage and salary, may be terminated at any time, at will, with or without cause, without previous notice. I further understand that neither this document or any statement by Country Arbors Nursery should be understood to create a contract of continuing employment. As a condition of employment, I agree to fully and completely comply with all policies concerning alcohol, drugs, safety, theft, and loss control, and further consent to such searches, inspections, examinations, and tests as may be required by policy.

PLEASE INITIAL _____ *By placing your initials on this line, you are certifying to the above statement.*

SIGNATURE OF APPLICANT _____ DATE: _____