

**Johnston's Evergreen Nursery, Inc.**

9865 Wales Road, Erie, PA 16510-5499

(814) 897-1900 Fax (814) 897-9800

E-Mail crispin@johnstonplants.comwww.johnstonplants.com**Employment Application**

Date Issued : _____ By: _____

*** Please Print ALL Information Except Signature ***

Personal Information

Date:		S.S.#		Day Phone #:	
Last Name:				Eve Phone #:	
First Name:				Middle Initial:	
Present Address :				Phone:	
Permanent Address:				Phone:	

Are you under 18 years of age? (Yes/No):		If Yes, Give Date of Birth:	
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How did you learn of this opening ? (Be Specific)	
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If hired, can you present evidence of U.S. Citizenship or your legal right to live and work in this country ? (Yes/No):	
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If you have been convicted of any crimes other than minor traffic violations, state the nature of the crime and the results of the court case:	

If hired, do you have a reliable means of transportation to get to and from work? (Yes/No):	
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Do you have any physical condition which may limit your ability to perform the particular job for which you are applying? (Yes/No):	
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If Yes, describe such condition:	
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Employment Desired and Availability

Position Applying For:		Full Time or Part Time ?	
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Date Available:		Preferred Starting Date:	
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Salary Desired:		Are you employed now?		If yes, please list present employer below:
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Please indicate below the days and hours on those days that you would be available for work:

Sunday:	(Yes/No)		Hours:	
Monday:	(Yes/No)		Hours:	
Tuesday:	(Yes/No)		Hours:	
Wednesday:	(Yes/No)		Hours:	
Thursday:	(Yes/No)		Hours:	
Friday:	(Yes/No)		Hours:	
Saturday:	(Yes/No)		Hours:	

Have you ever applied to this facility before? If so, where? when?

Education			
School Level	School Name & Location	Graduate? (Yes/No)	Subjects Studied (Be Specific)
Elementary School			
High School			
College or Military Service School			
Trade/Business School or Military Service School			

Employment History - List Most recent employer first. (Include Military Service Here if applicable)

Date/Month/Year Employed (or Military Service Dates) From To	Employer's Name, Address, Supervisor's Title/Name, Phone Number (or Military Branch)	Job Title and Duties (or Military Rank at Entrance and Discharge)	Salary		Reason For Leaving
			Start	Finish	

Reference Information - Please exclude relatives.

Name and Occupation	Address	Phone Number

In case of emergency, please notify:

Certification

"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 shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, and release all parties from all liability for any damage that may result from furnishing same to you.

I agree to submit to a physical examination, if required.

I understand and agree that, if hired, my employment is for no definite period of time and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice and without cause."

Date:		Signature of Applicant:	
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