

LAWN MASTERS

4101 Tates Creek Centre Drive
Suite 150 PMB 173
Lexington, Kentucky 40517
859-321-8080

Date Received: _____

Personal Information			
Last Name	First Name	Middle Name	Today's Date
Street Address	City	State	Zip Code
Home Phone: (____) _____ - _____		Are you a United States Citizen or legally eligible to work in the U. S.? ____Yes ____No (if hired, you will be required to provide documentation that you are eligible to work in the U.S.)	
Work Phone: (____) _____ - _____			
Other: (____) _____ - _____			
Are you 18 or over? ____Yes ____No			
Title of Position Applying For:			Date Available to Work
Desired Salary Range:			
Have you been previously interviewed or employed by Lawn Masters? ____Yes ____No If Yes, list date(s) and job title(s):			
Do you have any relatives currently working for the Lawn Masters? ____Yes ____No If Yes, list names and relationship to you:			
Are you employed now?		If so, may we contact your present employer?	

Education			
Name and Location	# Years Completed	Major Area of Study	Degree/Diploma
High School			
College			

Graduate School				
Technical or Certificate Programs				

Employment History Please provide the following information for your previous three employers, beginning with the most recent: (Please attach an additional page if necessary, do not use "see attached resume".)

Employer:	Dates Employed: From _____ To _____	Job Title:
Address:		
Telephone:	Job Duties:	
Weekly Pay Start: Finish:		
Reason for Leaving:		

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Address:		
Telephone:	Job Duties:	
Weekly Pay Start: Finish:		
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Address:		
Telephone:	Job Duties:	
Weekly Pay Start: Finish:		

Reason for Leaving:	

Describe your qualifications for the type of employment you are seeking: (Please include skills, special training, etc.)

Please list any certifications, awards, scholarships, or achievements.

References Please list names of supervisors, managers, or others who can comment directly on your abilities:				
Name	Address	Phone #	Relationship/Occupation	Years Known

If applying for a crew leader, or managerial position, please provide a valid drivers licenses:

Drivers License Number: _____ State Issued: _____

Expiration Date: _____

Applicant Statement

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if employed, false statements on this application shall be considered sufficient cause of dismissal. You are hereby authorized to make investigation of my personal references.

Lawn Masters is an Equal Opportunity Employer. It is the policy of the Lawn Masters not to discriminate in employment matters on the basis of race, creed, color, age, marital status, national origin, sex, or status with regard to public assistance or disability.

Sign only after you have read the above statements.

Printed Name of Applicant

Signature of Applicant

Date