

# ROOTS IN THE COVE, INC.

FLORIST-GREENHOUSE-LANDSCAPING-GIFTS-GARDEN CENTER-NURSERY

## APPLICATION FOR EMPLOYMENT

NAME: \_\_\_\_\_

FULL ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER(S) \_\_\_\_\_

SOCIAL SECURITY NUMBER \_\_\_\_\_

- WHAT POSITION ARE YOU APPLYING FOR? \_\_\_\_\_
- IF YOU ARE UNDER 18 YEARS OF AGE CAN YOU PROVIDE REQUIRED PROOF OF ELIGIBILITY TO WORK?  
\_\_\_\_\_ Yes \_\_\_\_\_ No
- ARE YOU CURRENTLY EMPLOYED? \_\_\_\_\_ Yes \_\_\_\_\_ No
- MAY WE CONTACT YOUR PRESENT EMPLOYER? \_\_\_\_\_ Yes \_\_\_\_\_ No
- ARE YOU LEGALLY AUTHORIZED TO WORK IN THE US? \_\_\_\_\_ Yes \_\_\_\_\_ No
- ARE YOU CURRENTLY ON LAY-OFF STATUS AND SUBJECT TO RECALL? \_\_\_\_\_ Yes \_\_\_\_\_ No
- HAVE YOU BEEN CONVICTED OF A FELONY IN THE PAST 7 YEARS? \_\_\_\_\_ Yes \_\_\_\_\_ No
- IF SO PLEASE EXPLAIN \_\_\_\_\_  
\_\_\_\_\_
- WHAT TYPE OF WORK ARE YOU AVAILABLE FOR? \_\_\_\_\_ FULL TIME \_\_\_\_\_ PART TIME \_\_\_\_\_ BOTH
- ON WHAT DATE WOULD YOU BE AVAILABLE FOR WORK? \_\_\_\_\_
- HAVE YOU EVER APPLIED TO THIS COMPANY BEFORE? \_\_\_\_\_ Yes \_\_\_\_\_ No
- PLEASE LIST ANY DAYS OR DATES AND TIMES YOU WOULD NOT BE AVAILABLE FOR WORK.  
\_\_\_\_\_  
\_\_\_\_\_

### EDUCATION

(NAME, LOCATION, YEARS ATTENDED, MAJORS, GRADUATE?)

HIGH SCHOOL \_\_\_\_\_

COLLEGE \_\_\_\_\_

OTHER (PLEASE SPECIFY) \_\_\_\_\_

DO YOU POSSESS AND MAINTAIN A PA PESTICIDE APPLICATOR'S LICENSE? \_\_\_\_\_ Yes \_\_\_\_\_ No

## EMPLOYMENT EXPERIENCE

START WITH MOST RECENT JOB. MILITARY AND VOLUNTEER ACTIVITIES MAY BE INCLUDED

1.

EMPLOYER \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
SUPERVISOR \_\_\_\_\_ DATES OF EMPLOYMENT \_\_\_\_\_  
PHONE # \_\_\_\_\_ TITLE \_\_\_\_\_ RATE/SALARY \_\_\_\_\_  
REASON FOR LEAVING \_\_\_\_\_

2.

EMPLOYER \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
SUPERVISOR \_\_\_\_\_ DATES OF EMPLOYMENT \_\_\_\_\_  
PHONE # \_\_\_\_\_ TITLE \_\_\_\_\_ RATE/SALARY \_\_\_\_\_  
REASON FOR LEAVING \_\_\_\_\_

3.

EMPLOYER \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
SUPERVISOR \_\_\_\_\_ DATES OF EMPLOYMENT \_\_\_\_\_  
PHONE # \_\_\_\_\_ TITLE \_\_\_\_\_ RATE/SALARY \_\_\_\_\_  
REASON FOR LEAVING \_\_\_\_\_

4.

EMPLOYER \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
SUPERVISOR \_\_\_\_\_ DATES OF EMPLOYMENT \_\_\_\_\_  
PHONE # \_\_\_\_\_ TITLE \_\_\_\_\_ RATE/SALARY \_\_\_\_\_  
REASON FOR LEAVING \_\_\_\_\_

## HOLIDAY HOURS

WEDDINGS, SPECIAL OCCASIONS, AND HOLIDAY PERIODS SUCH AS CHRISTMAS, VALENTINE'S DAY, MOTHER'S DAY, ECT. MAKE IT NECESSARY FOR FLOWER SHOP EMPLOYEES TO WORK UNTIL ORDERS ARE COMPLETED. SHOP EMPLOYEES CAN BE SCHEDULED 6 OR 7 DAYS PER WEEK AT HOLIDAYS AND MAY WORK 60 TO 70 HOURS OR MORE PER WEEK AT THESE TIMES. ARE YOU WILLING AND ABLE TO WORK AS NECESSARY TO COMPLETE HOLIDAY AND SPECIAL OCCASION WORK? \_\_\_\_\_ Yes \_\_\_\_\_ No

## ADDITIONAL INFORMATION

USE THE SPACE BELOW TO SUMMARIZE ANY JOB RELATED SKILLS AND/OR QUALIFICATIONS ACQUIRED FROM EMPLOYMENT OR ANY OTHER EXPERIENCES. PLEASE LIST ANY OTHER INFORMATION THAT YOU MAY FEEL WILL BE HELPFUL WHILE CONSIDERING YOUR APPLICATION.

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## WORK CAPABILITY

WEDDINGS, FUNERALS, AND HOLIDAYS MAKE A FLOWER SHOP EXTREMELY BUSY. ON SUCH OCCASIONS EVERY EMPLOYEE HAS TO DO WHAT EVER HE OR SHE CAN TO MAKE CERTAIN OUR CUSTOMERS RECEIVE THEIR ORDERS AS REQUESTED AND IN A TIMELY MANNER. THE POSITION FOR WHICH YOU ARE APPLYING MAY NOT INVOLVE ALL OF THE ACTIVITIES, SKILLS AND PHYSICAL REQUIREMENTS LISTED BELOW, BUT BY KNOWING WHAT EVERYONE IN THE SHOP IS ABLE TO DO, JOBS CAN BE ASSIGNED BETTER IN ANY SITUATION. CHECK ANY OF THE ITEMS LISTED BELOW THAT YOU ARE ABLE AND WILLING TO DO WHEN NEEDED.

<input type="checkbox"/>	TYPING	<input type="checkbox"/>	ROUTING DELIVERIES
<input type="checkbox"/>	LIFTING BULKY PACKAGES FREQUENTLY	<input type="checkbox"/>	MAKING DELIVERIES
<input type="checkbox"/>	FREQUENT BENDING AND KNEELING	<input type="checkbox"/>	LOADING DELIVERIES
<input type="checkbox"/>	STANDING FOR LONG PERIODS OF TIME	<input type="checkbox"/>	DRIVING MANUAL TRANSMITION TRUCK
<input type="checkbox"/>	CUSTOMER SERVICE/SELLING	<input type="checkbox"/>	BOOKKEEPING/FILING
<input type="checkbox"/>	TALKING TO CUSTOMERS ON THE PHONE	<input type="checkbox"/>	MAKING CHANGE
<input type="checkbox"/>	WRITING/TYPING ORDERS CLEARLY & ACCURATELY	<input type="checkbox"/>	USING COMPUTER POINT OF SALE SYSTEM
<input type="checkbox"/>	CLEANING AND HOUSEKEEPING	<input type="checkbox"/>	WATERING
<input type="checkbox"/>	TOLERATING HEAT AND COLD (SEASONALLY)	<input type="checkbox"/>	WEEDING
<input type="checkbox"/>	USING A GPS	<input type="checkbox"/>	OPERATING A SKID LOADER
<input type="checkbox"/>	MAINTAINING A CLEAN WORK ENVIRONMENT	<input checked="" type="checkbox"/>	GETTING YOUR HANDS DIRTY (A MUST)
<input type="checkbox"/>	ORGANIZING	<input type="checkbox"/>	BEING A LEADER

## REFERENCES

LIST THREE PEOPLE, WHO ARE WELL ACQUAINTED WITH YOU,  
DO NOT LIST RELATIVES OR PREVIOUS EMPLOYERS

1.

NAME \_\_\_\_\_ PHONE # \_\_\_\_\_

YEARS KNOWN \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

2.

NAME \_\_\_\_\_ PHONE # \_\_\_\_\_

YEARS KNOWN \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

3.

NAME \_\_\_\_\_ PHONE # \_\_\_\_\_

YEARS KNOWN \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

## WE ARE AN EQUAL OPPORTUNITY EMPLOYER

WE CONSIDER APPLICANTS FOR ALL POSITIONS WITHOUT REGARD TO RACE, COLOR, RELIGION, CREED, GENDER,  
NATIONAL ORIGIN, AGE, DISABILITY, MARITAL STATUS, SEXUAL ORIENTATION, OR ANY OTHER LEGALLY  
PROTECTED STATUS.

## APPLICANT'S STATEMENT

I CERTIFY THAT THE ANSWERS GIVEN IN THIS APPLICATION ARE COMPLETE AND TRUE TO THE BEST OF MY  
KNOWLEDGE, AND UNDERSTAND THAT IF EMPLOYED, FALSIFIED STATEMENTS IN THIS APPLICATION OR IN  
ANY INTERVIEWS SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION FOR EMPLOYMENT AS  
MAY BE NECESSARY IN ARRIVING AT AN EMPLOYMENT DECISION AND RELEASE THE COMPANY FROM ALL  
LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM UTILIZATION OF SUCH INFORMATION.

I UNDERSTAND AND ACKNOWLEDGE THAT, UNLESS OTHERWISE DEFINED BY APPLICABLE LAW, ANY  
EMPLOYMENT RELATIONSHIP WITH THIS COMPANY IS OF AN "AT WILL" NATURE, WHICH MEANS THAT THE  
EMPLOYEE MAY RESIGN AT ANY TIME AND THE EMPLOYER MAY DISMISS THE EMPLOYEE AT ANY TIME WITH  
OR WITHOUT CAUSE. IT IS FURTHER UNDERSTOOD THAT THIS "AT WILL" EMPLOYMENT RELATIONSHIP MAY  
NOT BE CHANGED BY ANY WRITTEN DOCUMENT OR BY CONDUCT UNLESS SUCH CHANGE IS SPECIFICALLY  
ACKNOWLEDGED IN WRITING BY AN AUTHORIZED EXECUTIVE OF THIS COMPANY.

IN THE EVENT OF EMPLOYMENT, I UNDERSTAND THAT I AM REQUIRED TO ABIDE BY ALL RULES AND  
GUIDELINES OF THIS COMPANY.

APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_