



Pavers & Landscapes, L.L.C.  
 PO Box 43843  
 Brooklyn Park, MN 55443  
 (763) 315-9090 Fax: (763) 315-3109  
[www.paverinstaller.com](http://www.paverinstaller.com)

## Employment Application

Date \_\_\_\_\_ SSN#: \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
 First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ Email: \_\_\_\_\_

Position applied for:

- |  |   |
|--|---|
| <input type="checkbox"/> Foreman         | <input type="checkbox"/> I have prior landscaping experience                          |
| <input type="checkbox"/> Lead Man        | <input type="checkbox"/> I have no experience in landscape                            |
| <input type="checkbox"/> General Laborer | <input type="checkbox"/> I am over the age of 18                                      |
| <input type="checkbox"/> Driver          | <input type="checkbox"/> I am a U.S. citizen  |
| <input type="checkbox"/> Other           | <input type="checkbox"/> I am authorized to work in the U.S. on an unrestricted basis |

I have a valid Driver's License:  Yes  No

Class A:  Yes  No State: \_\_\_\_\_ D.L.#: \_\_\_\_\_

Any driving violations in the past 5 years? If yes, please check all that apply:

Moving  DWI/DUI  Revocation or suspension

What date are you available to start work? \_\_\_\_\_

Compensation expectations: \$ \_\_\_\_\_

Education level

High school graduate School: \_\_\_\_\_ Year: \_\_\_\_\_

GED Where: \_\_\_\_\_ When: \_\_\_\_\_

College or student School: \_\_\_\_\_ Year: \_\_\_\_\_

## Employment History

Please complete employment history (starting with present or last position) for the last 5 years.

May we contact your present employer?  Yes  No

Firm Name	Position held	From	To	Salary
Address	Supervisor	Phone		
City, State, Zip	Reason for leaving			

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I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future, if I am hired. I authorize the verification of any or all information listed above.

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