



# APPLICATION FOR EMPLOYMENT

5205 New Haven Circle, Barberton, OH 44203

“We are an equal opportunity employer. We do not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excluding any applicant’s consideration for employment on any basis protected by local, state, or federal law, including a person’s age, sex, race, creed, national origin, religion, disability, or veteran status. All applicants must fill out this application to be considered for employment; no applicant will be considered solely on the basis of a resume. This application will remain active for 60 days only. If you are not contacted by an Eberhardt Landscaping Inc. representative within 60 days and still wish to be considered for a position, you must fill out and submit another application.”

## I. Personal Information

1. Name: \_\_\_\_\_
2. Address: \_\_\_\_\_
3. Phone: \_\_\_\_\_
4. Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_
5. Email: \_\_\_\_\_
6. Positions of Interest: \_\_\_\_\_
7. Is there any information we would need about your name or use of another name for us to be able to check your work record? Please specify: \_\_\_\_\_
8. Do you have any relatives who are presently (or have formerly been) employed by Eberhardt Landscaping Inc.? \_\_\_\_\_
9. Are you prevented from becoming lawfully employed in the United States because of your VISA or immigration status? \_\_\_\_\_
10. How were you referred to our company? \_\_\_\_\_
11. Do you have a reliable means of transportation/driver’s license? \_\_\_\_\_
12. Within the last seven (7) years have you ever been convicted of, or served a sentence for, any type of criminal offense, other than a minor traffic violation? If YES, please describe the circumstances: \_\_\_\_\_  
\_\_\_\_\_
13. Are you currently facing any criminal charges or is there any warrant currently outstanding for your arrest? If YES, please explain: \_\_\_\_\_



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## II. Employment Record (Please include all employment for the past five (5) years.)

Start: \_\_\_\_\_ End: \_\_\_\_\_ Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Address: \_\_\_\_\_

Position: \_\_\_\_\_ Describe Work: \_\_\_\_\_

Last Wage: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Start: \_\_\_\_\_ End: \_\_\_\_\_ Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Address: \_\_\_\_\_

Position: \_\_\_\_\_ Describe Work: \_\_\_\_\_

Last Wage: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Start: \_\_\_\_\_ End: \_\_\_\_\_ Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Address: \_\_\_\_\_

Position: \_\_\_\_\_ Describe Work: \_\_\_\_\_

Last Wage: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Start: \_\_\_\_\_ End: \_\_\_\_\_ Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Address: \_\_\_\_\_

Position: \_\_\_\_\_ Describe Work: \_\_\_\_\_

Last Wage: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Start: \_\_\_\_\_ End: \_\_\_\_\_ Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Address: \_\_\_\_\_

Position: \_\_\_\_\_ Describe Work: \_\_\_\_\_

Last Wage: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your current employer for a reference? \_\_\_\_\_



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### III. Educational History

Years Completed:

Diploma/Degree:

High School: \_\_\_\_\_

College: \_\_\_\_\_

Other: \_\_\_\_\_

### IV. References (Please do not include family members or previous employers.)

Name: \_\_\_\_\_

Address \_\_\_\_\_

Phone: \_\_\_\_\_

Years Known: \_\_\_\_\_

Occupation: \_\_\_\_\_

Name: \_\_\_\_\_

Address \_\_\_\_\_

Phone: \_\_\_\_\_

Years Known: \_\_\_\_\_

Occupation: \_\_\_\_\_

### V. Work Availability

1. If your application receives favorable consideration, when are you able to begin work? \_\_\_\_\_
2. Are you able to meet the attendance requirements of the position? \_\_\_\_\_
3. Do you have any objection to working in excess of 40 hours per week? \_\_\_\_\_
4. Can you work over forty (40) hours per week without prior notice? \_\_\_\_\_
5. Can you work over eight (8) hours per day without prior notice? \_\_\_\_\_

### VI. Salary/Hourly Rate Requirements

1. If your application receives favorable consideration, what salary/hourly rate would you require?  
\$ \_\_\_\_\_ per \_\_\_\_\_



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## VII. Verification

### 1. Consent To Conduct Background Investigation

As a condition of an in consideration for Eberhardt Landscaping Inc.'s consideration of this application, I give permission to Eberhardt Landscaping Inc. to investigate my personally and employment history. I understand that this background investigation will include, but not limited to, verification of all information on this application, as well as interviews with past employers. I further give permission to Eberhardt Landscaping Inc. to conduct this investigation and to discuss the results of this investigation in connection with my application for employment.

### 2. Consent To Contact Past Employers

I give permission to Eberhardt Landscaping Inc. to contact all employers listed on this application (except those specifically excluded) for references. I further give permission to all current or previous employers and/or managers or supervisors to discuss my relevant personal and employment history with Eberhardt Landscaping Inc. I consent to release consent of such information whether orally or in writing. I hereby indemnify and release Eberhardt Landscaping Inc. and any persons proving or receiving such information from all liability and agree not to bring any legal action for defamation, invasion or privacy, or any other claims based upon any statement made to anyone at Eberhardt Landscaping Inc.

### 3. Consent To Contact Government Agencies

I give permission to any agent, attorney or representative of Eberhardt Landscaping Inc. to receive a copy of any information obtained in the file of any federal, state, or local court, governmental agency or investigator concerning or related to me. I further consent to the release of such information and waive any right under state law concerning notification of the request for a release of such information.

### 4. Cooperation With Investigation

I agree to fully cooperate in Eberhardt Landscaping Inc.'s background investigation and to sign any waivers or releases that may be necessary to obtain access to relevant information.

### 5. Application Considered For Sixty (60) Days

This employment application will be considered active for 60 days from the date below. If I want to be considered for a job with Eberhardt Landscaping Inc. after this period of time, I must complete and submit another application.

### 6. Medical Examination

I agree to submit to a medical examination which may include testing for drugs or alcohol prior to beginning work with Eberhardt Landscaping Inc. I understand that if I am employed by Eberhardt Landscaping Inc., I may be required, when job related and consistent with Eberhardt Landscaping Inc.'s business needs, to undergo a medical examination or testing for drugs and alcohol.

### 7. Falsification Statement

I understand that any falsification or willful omission of fact made in this application or in connection with any background investigation may be sufficient ground for rejection of this application, or if discovered after an offer of employment, for immediate dismissal.

### 8. Employment "At Will"

Employment "At Will" I understand that if I am hired by Eberhardt Landscaping Inc. my employment is "at will", meaning that it is for no definite period of time and can be terminated by me or by Eberhardt Landscaping Inc. with or without cause or notice, at any time. I also understand that no representative of Eberhardt Landscaping Inc. other than the President has the authority to enter an agreement with me contrary to the foregoing, and I understand that any agreement that the President might enter with me contrary to the foregoing must be in writing to be enforceable. I also understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between Eberhardt Landscaping Inc. and me for either employment or for the providing of any benefit. No promises regarding employment have been made to me and I understand that I have the right to terminate my employment at any time and that Eberhardt Landscaping Inc. retains a similar right.

### 9. Venue Of Summit County, Ohio

I agree that any dispute, claim, or controversy which may arise between Eberhardt Landscaping Inc. and myself with regard to this application for employment, or with regard to my employment by Eberhardt Landscaping Inc. if hired, including any claim that I was not hired or that I was disciplined or discharged as a result of my age, sex, color, race, creed, national origin, religious persuasion, or disability or in violation of Ohio Law, shall be brought and heard in Summit County, Ohio. The employee consents to said venue in virtue of executing this application.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

In order to obtain pertinent information for background checks and screenings, please provide the following information:

Driver's License Number: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_