

PRE-APPLICATION FOR EMPLOYMENT

*Pre-Employment Questionnaire
an Equal Opportunity Employer*

PERSONAL INFORMATION

NAME(LAST NAME FIRST)			SOCIAL SECURITY NO.	
PRESENT ADDRESS			APT #	PHONE
CITY	STATE	ZIP CODE	EMAIL	

DESIRED EMPLOYMENT

POSITION	DATE YOU CAN START	SALARY DESIRED
ARE YOU EMPLOYED NOW? <input type="checkbox"/> YES <input type="checkbox"/> NO		IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO
EVER APPLIED TO THIS COMPANY BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO		EVER WORKED FOR THIS COMPANY BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO

CURRENT AND PREVIOUS EMPLOYMENT

Please list the names of your present or previous employers in chronological order with present or last employer listed first. Include part-time or seasonal and all other employment.

EMPLOYER 1	Dates Employed	Work Performed
Telephone No.	Address:	
Job Title	Supervisor	Were you ever disciplined? If so, for what?
Reason for Leaving	Final Salary	

EMPLOYER 2	Dates Employed	Work Performed
Telephone No.	Address:	
Job Title	Supervisor	Were you ever disciplined? If so, for what?
Reason for Leaving	Final Salary	

EDUCATION - OPTIONAL

	Years Completed	School Name & Location	Describe Course of Study or Major
HIGH SCHOOL			
COLLEGE/UNIVERSITY			
TRADE OR CORRESPONDENCE			

OTHER INFORMATION

Please describe any other experience that you have which would be relevant to the job for which you are applying:

Consent to Reference and Background Check Form

I, _____, have received, read, understand and agree to the Background Check Policy in its entirety. If I had questions regarding the policy, I have asked and received explanations, eliminating any confusion I may have had. I have also been advised that any future questions can be directed to Human Resources.

I hereby authorize The Evensen Group, LLC dba RLC Landscaping to conduct any and all reference and background checks it desires that are listed under the terms of the Background Check Policy, and with this I authorize the Company to speak with my acquaintances, personal and professional, to gather information about me.

I authorize all former employers and references to provide any information about me to the Company, and release them of all liabilities and damages of all kinds for providing this information. I authorize the Company to verify the accuracy of all information that I have provided, and also release my educational transcripts to the Company for education verification purposes.

I understand and agree that the results of my reference and background checks may affect the employment decision of The Evensen Group, LLC dba RLC Landscaping, and I hereby release The Evensen Group, LLC dba RLC Landscaping from any and all claims which may result from my reference and background check results.

I also understand that the Background Check Policy is subject to change without notice, in order to maintain compliance with government and industry standards, and Company policy.

Employee Signature

Employee Printed Name

Employee Social Security Number

Date Received by Human Resources

**** Please fill out the below information ONLY if you have a FL Drivers License***

**AUTHORIZATION TO OBTAIN MOTOR VEHICLE RECORDS
POTENTIAL EMPLOYEE SIGNATURE REQUIRED**

To Potential Employee:

Date: _____

I am aware that consumer and motor vehicle reports may be obtained as part of RLC Landscaping Company's evaluation of my job application and/or employment. The reports may be procured by RLC Landscaping Company or its insurance company representative(s), and may include personal information obtained from state motor vehicle departments, my driving record, an assessment of my insurability for the insurance program, or other consumer reports.

By signing this letter, I hereby provide my authorization for RLC Landscaping Company or their insurance company representative(s) to procure such information and reports, as well as additional reports about me from time to time as deemed appropriate, to evaluate my insurability or for other permissible purposes.

Signature of Applicant/Employee

Name as it appears on Driver License

Driver License Number/State of Issuance

Date of Birth