



# INTEGRITY TREE SERVICES

## EMPLOYMENT APPLICATION

Position Applied For	Type of Employment Full Time <input type="checkbox"/> Summer <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/>	Date
----------------------	---	------

Name of Applicant (please indicate how you wish to be addressed)		Initial (s)
Last Name	First Name	

Address (No., Street, City, State, Zip Code)

Social Security Number	Telephone Number (Home)	Business
------------------------	-------------------------	----------

Previous Address in the United States

Have you ever been convicted of a felony?  
 YES       NO

Are you legally entitled to work in the United States? <input type="checkbox"/> YES <input type="checkbox"/> NO	Are you willing to relocate? <input type="checkbox"/> YES <input type="checkbox"/> NO
--	--

Do you have a valid driver's license? <input type="checkbox"/> YES <input type="checkbox"/> NO	Class	License #	State Issued
---	-------	-----------	--------------

### Education

Secondary School attended and location.	Highest grade successfully completed.	Year Graduated
---	---------------------------------------	----------------

University attended and location.	No. of years	Year graduated	Degrees

Major subjects of specialization.

Community College attended and location.	No. of years	Year graduated	Degrees

Major subjects of specialization.

Other Educational Training/ Courses.

### Office / Secretarial Applications

Skill/ Aptitude	Years of Experience	Words per minute	List secretarial training courses completed and any other training which may be helpful in considering your application.
Typing			
Shorthand			

**Employment History (List present or most recent positions first)**

1. Name of Employer		Address No.	Street	City
Type of Business		Department		Your Position
Duties				
Name and Position of Immediate Supervisor				
Date Employed ( Day, Mo, Yr )		Date Left ( Day, Mo, Yr )		Starting Salary
Date Employed ( Day, Mo, Yr )		Date Left ( Day, Mo, Yr )		Final Salary
Reason for leaving				

2. Name of Employer		Address No.	Street	City
Type of Business		Department		Your Position
Duties				
Name and Position of Immediate Supervisor				
Date Employed ( Day, Mo, Yr )		Date Left ( Day, Mo, Yr )		Starting Salary
Date Employed ( Day, Mo, Yr )		Date Left ( Day, Mo, Yr )		Final Salary
Reason for leaving				

3. Name of Employer		Address No.	Street	City
Type of Business		Department		Your Position
Duties				
Name and Position of Immediate Supervisor				
Date Employed ( Day, Mo, Yr )		Date Left ( Day, Mo, Yr )		Starting Salary
Date Employed ( Day, Mo, Yr )		Date Left ( Day, Mo, Yr )		Final Salary
Reason for leaving				

MAY WE ASK YOUR PRESENT EMPLOYER FOR A REFERENCE     YES     NO

**References (Please do not list relatives or former employers)**

Name	Occupation	Address	Phone

Whom do you know in this company?

---

Scholarships

---

Activities/ Interests (Student, Professional, Community, etc...)

---

Publication, patents and thesis subjects

---

Languages (spoken, written, read) Note fluency

---

Other interests or hobbies

---

Special talents

---

Medical      Do you agree to take a medical exam at company expense  
related to the essential requirements of the position?      YES       NO

---

We appreciate your interest in seeking employment with us - please feel free to make any additional remarks in the space provided below or attach any additional information that would be helpful in evaluating your qualifications.

---

Additional Remarks

**Please Read Carefully**

I hereby certify that to the best of my knowledge and belief the answers given by me to the foregoing questions and all statements made by me in the application are correct.

If employed, I agree that all material created and produced whether in written, graphic or broadcasting form, all inventions new or changes in process developed during my employment are the exclusive property of Integrity Tree Services to use and/or sell and that subsequent to my employment with Integrity Tree Services, I will not disclose, use or reveal any confidential information related to Integrity Tree Services without first obtaining written consent from an officer of Integrity Tree Services.

I hereby apply for employment upon the basis and understanding that such employment may be terminated at any time upon notice given to me personally or sent to my last known address.

I consent to Integrity Tree Services to obtain such personal and job-related information as required in connection with this for employment.

\_\_\_\_\_

Date

\_\_\_\_\_

Signature of Applicant