



America's Gardening Resource, Inc.

For Office Use only:

Received: _____

Answered: _____

Application for Employment

We consider applicants for all positions on the basis of qualifications and without regard to race, color, religion, sex, national origin, marital status, veteran status, disability, sexual orientation or any other protected status.

EMPLOYMENT INFORMATION

(Please print or write clearly)

Position applying for: _____

Date of application: _____

I am interested in working: (check all that apply)

Full time

Part time

Seasonal

I am available for the following shifts:

Day

Evening

Both

I am available to work weekends:

Yes

No

How were you referred to us? _____

Do you have any relatives employed by us?

Yes

No

If yes, their name: _____

PERSONAL INFORMATION

Last name: _____

First name: _____

Middle initial: _____

Street address: _____

City: _____

State: _____

Zip: _____

Home phone number: _____

Business phone number: _____

Cell phone number: _____

E-mail address: _____

Why are you interested in working at Gardener's Supply?

GENERAL INFORMATION

Are you legally eligible for employment in the US? Yes No (Verification will be required if hired.)

Are you over the age of 18 years? Yes No (If no, you may be required to provide authorization to work.)

Have you ever been fired, discharged or asked to resign? Yes No If yes, please explain.

Have you worked for Gardener's Supply before? Yes No
If yes, please state date(s) of employment and position(s) held.

What are your salary requirements?

EDUCATION AND TRAINING

School	Name and Location of School	Course of Study	# of Years Completed	Did you Graduate?	Degree or Diploma
High School					
Vocational, Technical and Junior Colleges					
University/ College					
Other					

Are you currently enrolled in a course(s) Yes No

If yes, name and describe course. Include name of program you are enrolled in and the name of the college, university or other school.

SKILLS INVENTORY

What business machine(s) can you operate? Keyboard skills: _____ wpm

Software applications knowledge:

What equipment can you operate?

Other job-related skills or activities:

EMPLOYMENT HISTORY

Please list present or most recent employer first.	
Company name	Telephone ()
Address	Employed (month and year) From To
Name of immediate supervisor	Hourly or yearly wage Start Ending
Job title	Reason for Leaving
Describe duties	
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Company name	Telephone ()
Address	Employed (month and year) From To
Name of immediate supervisor	Hourly or yearly wage Start Ending
Job title	Reason for Leaving
Describe duties	
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Company name	Telephone ()
Address	Employed (month and year) From To
Name of immediate supervisor	Hourly or yearly wage Start Ending
Job title	Reason for Leaving
Describe duties	
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Company name	Telephone ()
Address	Employed (month and year) From To
Name of immediate supervisor	Hourly or yearly wage Start Ending
Job title	Reason for Leaving
Describe duties	
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

SIGNATURE

I understand that this application will be active for a period of 30 days; after that time, if I wish to be considered for employment, I must submit a new application.

I certify that all information and answers contained in my application are true and complete to the best of my knowledge. I understand that if I have provided false information in my application or if I have omitted information requested in my application, that this is grounds for refusing employment or for my immediate termination from employment.

I authorize Gardener's Supply Company and its agents to thoroughly investigate my work and personal history and verify all data contained in this application, on related papers and in interview. I authorize all individuals, schools, firms named herein, except any former or current employer so noted, to provide any information all about me and I release them from any and all liability for damage in providing this information.

I understand that if I am employed by Gardener's Supply Company that I can terminate my employment at any time and for any reason and that Gardener's Supply Company retains the same right.

I acknowledge that I have read and understand the above statements.

Signature:

Date:

Our Vision

We are in business to spread the joys and rewards of gardening, because gardening nourishes the body, elevates the spirit, builds community, and makes the world a better place.

Our Mission

We are the market leader in developing and marketing innovative, earth-friendly products and information that help people garden more successfully.

How We Do Business

We provide products and information that help our customers have more fun and more success in their gardens.

We treat our customers as friends, and surprise and delight them with fast, personalized and caring service.

We foster an alive and learning corporate culture in which employees are active participants in achieving our company's mission.

We measure our success in traditional financial terms as well as in our positive impact on our employees, our community, and our planet.



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