



## EMPLOYMENT APPLICATION

Growing for the future with quality people,  
quality products and quality service.

Please print legibly and fill out all sections of this application completely.

If additional space is needed, please continue on a separate sheet. You are welcome to attach a resume and/or cover letter.

NAME \_\_\_\_\_ DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_ AVAILABLE TO START DATE \_\_\_\_\_

CITY: \_\_\_\_\_ STATE \_\_\_\_\_ ZIP: \_\_\_\_\_

PREFERRED PHONE#: \_\_\_\_\_ ALTERNATE PHONE#: \_\_\_\_\_

EMAIL: \_\_\_\_\_

Position(s) for which you are applying. Check all positions that interest you:

Previous experience/qualifications. Please circle all that apply to you even if you're not applying for that job:

	FULL-TIME	PART-TIME
GREENHOUSE PRODUCTION		
PRODUCTION FOREMAN/GROWER		
MAINTENANCE		
DRIVER		
RETAIL		
WHOLESALE SALES		
ADMINISTRATIVE/OFFICE		

Pesticide applicator license	Horticulture classes	Worked in greenhouse	Worked in landscape nursery
Worked as grower	Supervision	Identify common plants	Project management
Wood/metal construction	Electrical	Plumbing	Mechanical
Driven Semi/Straight truck	CDL/Chauffeurs license	Wholesale delivery	Familiar with towns in IA, MN, WI, IL
Worked in retail shop	Worked in flower shop	Cash register/change	Know Cresco streets
Cold calls	Phone sales	Wholesale sales	Order entry
Detail oriented	Data entry	Customer service	Multi-tasking
Worked on a farm?	Planted and tended a garden?	Raised indoor plants?	Planted nursery stock?
Taken art or craft classes?	Operate a forklift?	Operate a skidloader?	Valid driver's license State: _____
Welding experience?			

List other skills you would bring to Plantpeddler:

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\*rank your proficiency from 1 low to 5 high

Excel		Power Point		Social Media	
Word		Internet		PC Hardware	
Outlook		Publisher		Network Admin	

In what ways would you be an asset to Plantpeddler if you are hired? \_\_\_\_\_

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Which of the following routines do you prefer?

- An established daily routine with slight variation.     Regular weekly tasks     Wide variety of tasks, varying daily, weekly, yearly.



Are you at least 16 years old?  Yes  No

Can you legally work in the US?  Yes  No If no, please explain: \_\_\_\_\_

Have you applied at Plantpeddler before?  Yes  No If yes, when: \_\_\_\_\_

Have you ever worked for Plantpeddler before?  Yes  No

If yes, previous position, supervisor, and facility: \_\_\_\_\_

If yes, why did you leave? \_\_\_\_\_

YES	NO	
		Can you perform the essential functions of the job?
		Can you lift 50 pounds?
		Can you stand for long periods of time?
		Can you bend, reach, and squat repetitively?
		Do you have any plant allergies? Hay fever?
		Do you have any chemical restrictions? Bleach, latex?

Please provide any further clarification to answers above: \_\_\_\_\_

Our normal work schedule is 8am - 5pm Monday-Friday, with seasonal variation.

When would you be able to work? Shade boxes for preferred hours, x boxes when available, leave boxes blank when unavailable.

	6AM	7AM	8AM	9AM	10AM	11AM	12PM	1PM	2PM	3PM	4PM	5PM	6PM	7PM	8PM	9PM
MON																
TUES																
WED																
THURS																
FRI																
SAT																
SUN																

**APPLICANT'S STATEMENT**

READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING THIS APPLICATION. ONLY APPLICATIONS THAT ARE SIGNED AND DATED ARE CONSIDERED VALID.

- The information I am presenting in this application is complete, true and correct to the best of my knowledge. I understand that any falsification, misrepresentation, or omissions could result in the denial of my application, withdrawal of any other offer of employment, or immediate discharge.
- I understand that in connection with the application process, Plantpeddler and its representatives may contact my former employers, educational institutions, references and other relevant third parties to obtain additional information related to the information given by me in this application. I also understand Plantpeddler may conduct a background check. I hereby request, release and consent to the release and disclosure of such information. I further release and hold harmless Plantpeddler and affiliates, their officers, employees and agents, and any other parties inquiring about, investigating, furnishing, communicating, reviewing, or evaluating such information from any and all potential claims, demands, damages, liabilities and/or actions of any kind arising from such activities, whether known or unknown to me presently, that I may have, now or in the future.
- If employed, I agree to conform to the rules and regulations of Plantpeddler and understand that I will be an employee at-will and that my employment may be terminated at any time by me or Plantpeddler, with or without notice, for any reason. I understand that only an Officer of Plantpeddler has the authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing, which must be in writing and signed.

Applicant's Signature	Date
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**EQUAL OPPORTUNITY EMPLOYER**  
 Plantpeddler does not discriminate on the basis of race, sex, color, religion, national origin, sexual orientation, age, disability, veteran status or any other factors made unlawful under applicable federal and state laws. All employment decisions are made without prejudice or discrimination, in accordance with the principle of equal opportunity.

HIGH SCHOOL	NAME & ADDRESS	
YEARS COMPLETED: 1 2 3 4	DID YOU GRADUATE? <input type="checkbox"/> Yes <input type="checkbox"/> No	IF STILL ENROLLED, CURRENT GRADE FRESHMAN   SOPHOMORE   JUNIOR   SENIOR
COURSE OF STUDY:		DEGREE EARNED:

COLLEGE/ VOCATION	NAME & ADDRESS	
YEARS COMPLETED: 1 2 3 4	DID YOU GRADUATE? <input type="checkbox"/> Yes <input type="checkbox"/> No	IF STILL ENROLLED, CURRENT GRADE FRESHMAN   SOPHOMORE   JUNIOR   SENIOR
COURSE OF STUDY:		DEGREE EARNED:

OTHER	NAME & ADDRESS	
YEARS COMPLETED: 1 2 3 4	DID YOU GRADUATE? <input type="checkbox"/> Yes <input type="checkbox"/> No	IF STILL ENROLLED, CURRENT GRADE FRESHMAN   SOPHOMORE   JUNIOR   SENIOR
COURSE OF STUDY:		DEGREE/CERTIFICATE EARNED:

List any other courses or training programs you've completed that would impact your work at Plantpeddler:

<b>MEMBERSHIP IN PROFESSIONAL, EDUCATIONAL OR CIVIC ORGANIZATIONS</b> (Exclude those which may disclose your race, color, religion or national origin.)

**REFERENCES** (Please list people who are not relatives or former employers):

1. NAME \_\_\_\_\_ PHONE \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ HOW LONG HAVE YOU KNOWN THIS PERSON? \_\_\_\_\_
2. NAME \_\_\_\_\_ PHONE \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ HOW LONG HAVE YOU KNOWN THIS PERSON? \_\_\_\_\_
3. NAME \_\_\_\_\_ PHONE \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ HOW LONG HAVE YOU KNOWN THIS PERSON? \_\_\_\_\_

Starting with your present or most recent position, please give an accurate, full-time and part-time employment record. Include military service assignments and volunteer activities if for an extended period.

**1** EMPLOYER \_\_\_\_\_ DATES EMPLOYED: FROM \_\_\_\_\_ TO \_\_\_\_\_ WEEKLY RATE STARTING \_\_\_\_\_ FINAL \_\_\_\_\_  
ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_  
POSITION TITLE \_\_\_\_\_ SUPERVISOR'S NAME & TITLE \_\_\_\_\_  
DESCRIBE THE WORK YOU DID: \_\_\_\_\_  
EXPLAIN YOUR REASONS FOR LEAVING: \_\_\_\_\_  
MAY WE CONTACT THIS EMPLOYER?  Yes  No IF NO, WHY NOT? \_\_\_\_\_

**2** EMPLOYER \_\_\_\_\_ DATES EMPLOYED: FROM \_\_\_\_\_ TO \_\_\_\_\_ WEEKLY RATE STARTING \_\_\_\_\_ FINAL \_\_\_\_\_  
ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_  
POSITION TITLE \_\_\_\_\_ SUPERVISOR'S NAME & TITLE \_\_\_\_\_  
DESCRIBE THE WORK YOU DID: \_\_\_\_\_  
EXPLAIN YOUR REASONS FOR LEAVING: \_\_\_\_\_  
MAY WE CONTACT THIS EMPLOYER?  Yes  No IF NO, WHY NOT? \_\_\_\_\_

**3** EMPLOYER \_\_\_\_\_ DATES EMPLOYED: FROM \_\_\_\_\_ TO \_\_\_\_\_ WEEKLY RATE STARTING \_\_\_\_\_ FINAL \_\_\_\_\_  
ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_  
POSITION TITLE \_\_\_\_\_ SUPERVISOR'S NAME & TITLE \_\_\_\_\_  
DESCRIBE THE WORK YOU DID: \_\_\_\_\_  
EXPLAIN YOUR REASONS FOR LEAVING: \_\_\_\_\_  
MAY WE CONTACT THIS EMPLOYER?  Yes  No IF NO, WHY NOT? \_\_\_\_\_

**4** EMPLOYER \_\_\_\_\_ DATES EMPLOYED: FROM \_\_\_\_\_ TO \_\_\_\_\_ WEEKLY RATE STARTING \_\_\_\_\_ FINAL \_\_\_\_\_  
ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_  
POSITION TITLE \_\_\_\_\_ SUPERVISOR'S NAME & TITLE \_\_\_\_\_  
DESCRIBE THE WORK YOU DID: \_\_\_\_\_  
EXPLAIN YOUR REASONS FOR LEAVING: \_\_\_\_\_  
MAY WE CONTACT THIS EMPLOYER?  Yes  No IF NO, WHY NOT? \_\_\_\_\_

Have you ever been discharged by an employer?  Yes  No If yes, please explain all terminations: \_\_\_\_\_

List all periods during which you were unemployed: \_\_\_\_\_

How did you spend this time? \_\_\_\_\_