

Employment History (Start with most recent or present employer)

Current or Most Recent Employer

Address _____ Telephone number _____
() _____

Job Title _____

Duties _____

Date hired _____ Date left _____ Starting rate of pay _____ Ending rate of pay _____ {1}{2}

How long did you work for this employer? {3}{4} less than 6 mos. 6 mos. to 1 yr. 1 yr. to 18 mos. more than 18 mos.
{5}

Reason for Leaving

<input type="checkbox"/> Better pay	<input type="checkbox"/> Moving	<input type="checkbox"/> Problems with other employees	<input type="checkbox"/> Laid Off
<input type="checkbox"/> School	<input type="checkbox"/> Financial reasons	<input type="checkbox"/> Problems with Supervisor	<input type="checkbox"/> Personal reasons
<input type="checkbox"/> Health reasons	<input type="checkbox"/> Discharged/Terminated	<input type="checkbox"/> Not enough hours	<input type="checkbox"/> Other _____

Immediate Supervisor Name _____ Position _____ May we contact this employer prior to extending a conditional offer of employment? YES NO

{6} Length of lapse of employment between jobs less than 1 week 1 week to 1 month 1-2 months more than 2 months

Second Most Recent Employer

Address _____ Telephone number _____
() _____

Job Title _____

Duties _____

Date hired _____ Date left _____ Starting rate of pay _____ {7}{8} Ending rate of pay _____

How long did you work for this employer? {9}{10} less than 6 mos. 6 mos. to 1 yr. 1 yr. to 18 mos. more than 18 mos.
{11}

Reason for Leaving

<input type="checkbox"/> Better pay	<input type="checkbox"/> Moving	<input type="checkbox"/> Problems with other employees	<input type="checkbox"/> Laid Off
<input type="checkbox"/> School	<input type="checkbox"/> Financial reasons	<input type="checkbox"/> Problems with Supervisor	<input type="checkbox"/> Personal reasons
<input type="checkbox"/> Health reasons	<input type="checkbox"/> Discharged/Terminated	<input type="checkbox"/> Not enough hours	<input type="checkbox"/> Other _____

Immediate Supervisor Name _____ Position _____ May we contact this employer prior to extending a conditional offer of employment? YES NO

{12} Length of lapse of employment between jobs less than 1 week 1 week to 1 month 1-2 months more than 2 months

Third Most Recent Employer

Address _____ Telephone number _____
() _____

Job Title _____

Duties _____

Date hired _____ Date left _____ Starting rate of pay _____ {13}{14} Ending rate of pay _____

How long did you work for this employer? {15}{16} less than 6 mos. 6 mos. to 1 yr. 1 yr. to 18 mos. more than 18 mos.
{17}

Reason for Leaving

<input type="checkbox"/> Better pay	<input type="checkbox"/> Moving	<input type="checkbox"/> Problems with other employees	<input type="checkbox"/> Laid Off
<input type="checkbox"/> School	<input type="checkbox"/> Financial reasons	<input type="checkbox"/> Problems with Supervisor	<input type="checkbox"/> Personal reasons
<input type="checkbox"/> Health reasons	<input type="checkbox"/> Discharged/Terminated	<input type="checkbox"/> Not enough hours	<input type="checkbox"/> Other _____

Immediate Supervisor Name _____ Position _____ May we contact this employer prior to extending a conditional offer of employment? YES NO

{18} Length of lapse of employment between jobs less than 1 week 1 week to 1 month 1-2 months more than 2 months

Hours of Availability: Are there any days or hours during which you can not work? YES NO

If yes, please list hours when you can not work:

Sun _____ Mon _____ Tues _____ Wed _____ Thurs _____ Fri _____ Sat _____

Wage requirement: \$ _____ Hourly/Annually ^{19} Would you be willing to relocate if necessary? YES NO

Other Information: Please identify the fields in which you have had experience or training.

- ^{20}
- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Management | <input type="checkbox"/> Customer Service | <input type="checkbox"/> General Clerical | <input type="checkbox"/> Security/Loss prevention |
| <input type="checkbox"/> Cash Register | <input type="checkbox"/> Data Entry | <input type="checkbox"/> Maintenance | <input type="checkbox"/> Stock/Inventory Processing |
| <input type="checkbox"/> Retail Sales | | | |

List Software Experience: _____

Have you applied for a job with us before: YES NO

^{21} Have you ever worked for us before? YES NO At what location? _____

Do you have any relatives employed by Garden Supply Co.? YES NO

What relationship? _____ What location? _____

Background Information

Have you ever been convicted of a crime? Exclude any misdemeanor conviction that occurred more than five years ago from the date of this application. A conviction may not necessarily disqualify an applicant. NOTE: An applicant with a court-ordered sealed record may answer "No" with respect to that conviction.

YES NO If YES, state *date, court,* and *city/state* where offense occurred: _____

^{22} Have you ever been discharged from a position, or resigned to avoid discharge?
YES NO If YES, describe circumstances: _____

Education

	<u>Name</u>	<u>Location</u>	<u>Graduated?</u>	<u>Course of Study</u>
GED	_____	_____	YES <input type="checkbox"/> NO <input type="checkbox"/>	_____
^{23} High School	_____	_____	YES <input type="checkbox"/> NO <input type="checkbox"/>	_____
^{24} College/University	_____	_____	YES <input type="checkbox"/> NO <input type="checkbox"/>	_____
^{{25}{26}} Post Graduate	_____	_____	YES <input type="checkbox"/> NO <input type="checkbox"/>	_____

Are you currently enrolled in a course of study? YES NO If so, are you Full Time or Part Time
If yes, what? _____ Where? _____

Referred to Garden Supply Co. By:

- ^{27}
- | | | | |
|---|--|-----------------------------------|--------------------------------------|
| <input type="checkbox"/> Hiring signs | <input type="checkbox"/> Radio ad | <input type="checkbox"/> Internet | <input type="checkbox"/> Billboards |
| <input type="checkbox"/> Hiring banner | <input type="checkbox"/> Television ad | <input type="checkbox"/> Walk-in | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Employment Ad - publication/date _____ | | | |
| <input type="checkbox"/> Garden Supply Co. Associate - name _____ | | | |

A Few More Questions:

{28}{29}

A. How many times have you been late or absent from work (school) in the past year? _____

{30}{31}{32}

B. What do you think should happen to a dishonest associate?

Termination Prosecution Warning Nothing Other _____

C. An outstanding Associate that steals inexpensive items a few times a year should be given another chance. TRUE FALSE

D. I believe it is okay to use recreational drugs as long as it is on my time and doesn't hinder my performance at work. TRUE FALSE

E. I have stolen small items from previous employers, but will use better judgement in the future. TRUE FALSE

F. In previous jobs, the total amount of money and merchandise that I have taken is:

None Less than \$10 Less than \$20 Less than \$50 Over \$50 Can't remember

G. Most of my friends have stolen at some time in their life. TRUE FALSE

H. Most job applicants don't tell the entire truth when completing an application in order to make it look better. TRUE FALSE

I. Most people are at least tempted to steal from their employer. TRUE FALSE

J. Have you ever missed assigned work hours due to the use of alcoholic beverages? YES NO

K. It is sometimes necessary to tell small lies to stay out of trouble. TRUE FALSE

L. If you were a cashier and discovered that you mistakenly shortchanged a previous customer by less than fifty cents, you would probably:

- Leave the money in the drawer even if it causes the register to be out of balance.
- Spend the money in the company break room.
- If the customer has not returned by the end of your shift, take the money.
- Call the Manager immediately.

M. Anger sometimes makes me do things that I otherwise would not do. TRUE FALSE

N. If you knew a friend or Associate was stealing, would you report it if you knew you could do so anonymously? YES NO

O. Most employees would steal if they weren't afraid of getting caught. TRUE FALSE

P. Studies have revealed that most employees steal at one time or another. TRUE FALSE

Q. It is okay to respond to aggressive behavior with aggressive behavior. TRUE FALSE

R. Employees take things from work all the time without anybody knowing about it. TRUE FALSE

Professional References

Name _____ Association _____ Telephone (____) _____

Address _____
STREET CITY STATE ZIP

Name _____ Association _____ Telephone (____) _____

Address _____
STREET CITY STATE ZIP

Name _____ Association _____ Telephone (____) _____

Address _____
STREET CITY STATE ZIP

THINKING ABOUT HOW OTHER PEOPLE SEE YOU...

Directions: Consider how other people see you in work situations. *Reading across*, please look at each row and rank the four words from 4 (the word in that row that is most like how people see you) to 1 (the word in that row that is least like how other people see you). Reading across, your total for each row should be 10 (4,3,2 and 1). When you have completed the ranking of each row, please total each column and place that total in the spaces provided at the bottom of the page.

Example:

 2 Charming 3 Refined 4 Systematic 1 Forceful =10

Column 1	Column 2	Column 3	Column 4	
<u> </u> Enthusiastic	<u> </u> Daring	<u> </u> Dedicated	<u> </u> Intense	=10
<u> </u> Good natured	<u> </u> Obedient	<u> </u> Perceptive	<u> </u> Risk taker	=10
<u> </u> Friendly	<u> </u> Timid	<u> </u> Alert	<u> </u> Forceful	=10
<u> </u> Outgoing	<u> </u> Loyal	<u> </u> Observant	<u> </u> Inspiring	=10
<u> </u> Responsive	<u> </u> Humble	<u> </u> Knowledgeable	<u> </u> Original	=10
<u> </u> Tactful	<u> </u> Firm	<u> </u> Flexible	<u> </u> Compliant	=10
<u> </u> Cheerful	<u> </u> Modest	<u> </u> Quick	<u> </u> Predictable	=10
<u> </u> Charming	<u> </u> Reserved	<u> </u> Systematic	<u> </u> Trusting	=10
<u> </u> Sociable	<u> </u> Refined	<u> </u> Exact	<u> </u> Pioneering	=10
<u> </u> Soft spoken	<u> </u> Outspoken	<u> </u> Organized	<u> </u> Introverted	=10
<u> </u> Optimistic	<u> </u> Fearful	<u> </u> Deliberate	<u> </u> Animated	=10
<u> </u> Courteous	<u> </u> Charming	<u> </u> Resourceful	<u> </u> Decisive	=10
<u> </u> Easy going	<u> </u> Determined	<u> </u> Orderly	<u> </u> Controlled	=10
<u> </u> Appealing	<u> </u> Traditional	<u> </u> Cooperative	<u> </u> Bold	=10
<u> </u> Helpful	<u> </u> Intuitive	<u> </u> Self reliant	<u> </u> Argumentative	=10
<u> </u> TOTAL	<u> </u> TOTAL	<u> </u> TOTAL	<u> </u> TOTAL	

THINKING ABOUT YOU AT WORK...

Reading across, rank the phrases in each row from 3 to 1 (3 being most like you to 1 being least like you). As you read across, your total for each row should be 6 (3,2, and 1). When you are finished, total your score for each column at the bottom.

Example:

<u> 2 </u> Like physical activity	<u> 3 </u> Enjoy completing tasks	<u> 1 </u> Prefer working alone = 6
Column 1	Column 2	Column 3
_____ Prefer to follow orders	_____ Able to do several things at one time	_____ Accurate with numbers =6
_____ Tend to finish what I start	_____ Find it easy to talk with strangers	_____ Listen patiently to others =6
_____ Accept responsibility easily	_____ People tell me their concerns	_____ Work efficiently =6
_____ Like to know the rules	_____ Keep work area clean and orderly	_____ Speak clearly and concisely =6
_____ Like physical activity	_____ Enjoy creative activity	_____ Want to get things done now =6
_____ Like to work behind the scenes	_____ Start conversations easily	_____ Make few errors =6
_____ Prefer working by myself	_____ Like to help others	_____ Work well when the pace is quick =6
_____ Prefer repetitive tasks	_____ Enjoy constant variety of tasks	_____ Can handle people with conflict =6
_____ Follow procedures well	_____ Aware of personal appearance	_____ Enjoy working with computers =6
_____ Enjoy completing tasks	_____ Enjoy fashion, color, design	_____ Enjoy solving people problems =6
_____ TOTAL	_____ TOTAL	_____ TOTAL

ONLY FULLY COMPLETED APPLICATIONS WILL BE CONSIDERED.

THANK YOU FOR YOUR INTEREST IN EMPLOYMENT WITH GARDEN SUPPLY CO.