Email To: todd@tlcscape.com or Fax To: (208) 336-9899

## **TLC Landscape's Employment Application**

<b>Application Date: COMPLETE ENTIRE A</b>	PPLICATION. PLEASE DO N	_ Date Available to Start Work OT LEAVE ANY SECTIONS BLANK.
discriminate against any orientation, creed, disabi personal action includi Landscape, LLC is fam	employment or applicant for lity, marital status, veteran stands, but not limited to, recruily committed to a bias-free with TLC Landscape's non-dis-	olicy of nondiscrimination in employment. TLC Landscape, LLC will not employment because of rare, color, religion, national origin, age, sex, sexual atus, or any other protected characteristic or feature. This policy extends to all uitment, promotion, transfer, rate of pay, training and termination. TLC work environment and a policy of equal employment opportunity for all scrimination policy, harassment in the workplace on the basis of any factor
Last Name First Name		Middle Initial
Street Address		Apt # Home Phone # Area Code First
City	State Zip Code	Social Security #
Are you veteran?	ve valid work permit? Yes No Military I ce, including special trainir	
Do you have a valid d	river license? Yes	No If yes, state and license number:
Do you have any phys	ical limitations that would	prevent you from performing the duties involved in the position?
Yes No If ye	es, explain:	
Do you have experien	ce with any of our offered s	services from the following list? Tick all items that apply.
<b>Landscape Design:</b>		Landscape Maintenance:
Sprinkler Irrigation Installation		Sprinkler Troubleshooting & Repair
Shrub & tree planting		Shrub & Tree Pruning & Removal
Sod Preparation	and Planting	Turf Fertilization & Weed Treatment
Building Retaining Walls & Paver Installation		on Mowing, Trimming & Blowing
Boulder Placeme	ent	Spring/ Fall Debris Cleanup & Hauling
Ground Cover Installation (weed barrier & bark)		bark) Power Aeration
Waterfall Constr	uction	Power Edging

Name/Address							
	# Of Year Completed Did you Graduate? Yes No						
COLLEGE							
Name/Address							
	# Of Year Completed Did you Graduate? Yes No Degree Receive						
GRADUATE SCHOOL/SPE	CIAL TRAINING/OTHER						
Name/Address							
	# Of Year Completed Did you Graduate? Yes No Degree Receiv						
Are you currently attending school? Yes No If yes, what is your course of study?							
EMPLOYMENT HISTORY:	MOST RECENT FIRST						
EMPLOYER # 1							
Company Name :	Phone:						
Street Address:							
Your Position:	Date Employed:						
From / to /							
From / to / City and State Zip Code	Supervisor's Name/Titleu performed and the skills used or learned)						
From/ to/ City and State Zip Code Duties (Describe in detail work yo							
From/ to/ City and State Zip Code Duties (Describe in detail work yo EMPLOYER # 2	u performed and the skills used or learned).						
From/ to/ City and State Zip Code Duties (Describe in detail work yo  EMPLOYER # 2 Company Name :	u performed and the skills used or learned).						
From / to / City and State Zip Code Duties (Describe in detail work you be seen to be se	performed and the skills used or learned).  Phone:						
From / to / City and State Zip Code Duties (Describe in detail work you EMPLOYER # 2  Company Name : Street Address: Your Position: to / to /	performed and the skills used or learned).  Phone:  Date Employed:						
From / to / City and State Zip Code Duties (Describe in detail work you EMPLOYER # 2  Company Name : Street Address: Your Position: from / to / City and State Zip Code	performed and the skills used or learned).  Phone:  Date Employed:  Supervisor's Name/Title						
From / to / City and State Zip Code Duties (Describe in detail work you EMPLOYER # 2  Company Name : Street Address: Your Position: from / to / City and State Zip Code	performed and the skills used or learned).  Phone:  Date Employed:						
From / to / City and State Zip Code Duties (Describe in detail work you  EMPLOYER # 2  Company Name : Street Address: Your Position: From / to / City and State Zip Code Duties (Describe in detail work you	performed and the skills used or learned).  Phone:  Date Employed:  Supervisor's Name/Title						
From / to / City and State Zip Code Duties (Describe in detail work you  EMPLOYER # 2  Company Name : Street Address: Your Position: From / to / City and State Zip Code Duties (Describe in detail work you  EMPLOYER # 3							
From / to / City and State Zip Code Duties (Describe in detail work you  EMPLOYER # 2  Company Name : Street Address: Your Position: From / to / City and State Zip Code Duties (Describe in detail work you  EMPLOYER # 3  Company Name :	performed and the skills used or learned).  Phone:  Date Employed:  Supervisor's Name/Title  a performed and the skills used or learned).  Phone:						
From / to / City and State Zip Code Duties (Describe in detail work you  EMPLOYER # 2  Company Name : Street Address: Your Position: From / to / City and State Zip Code Duties (Describe in detail work you  EMPLOYER # 3  Company Name : Street Address:	performed and the skills used or learned).  Phone:  Date Employed:  Supervisor's Name/Title  u performed and the skills used or learned).  Phone:  Phone:						
From / to / City and State Zip Code Duties (Describe in detail work you  EMPLOYER # 2  Company Name : Street Address: Your Position: From / to / City and State Zip Code Duties (Describe in detail work you  EMPLOYER # 3  Company Name : Street Address:	performed and the skills used or learned).  Phone:  Date Employed:  Supervisor's Name/Title  a performed and the skills used or learned).  Phone:						
From / to / City and State Zip Code Duties (Describe in detail work yo  EMPLOYER # 2  Company Name : Street Address: Your Position: City and State Zip Code Duties (Describe in detail work yo  EMPLOYER # 3  Company Name : Street Address: Your Position: From / to / From / to / From / to /	performed and the skills used or learned).  Phone:  Date Employed:  Supervisor's Name/Title  u performed and the skills used or learned).  Phone:  Phone:						

REFERENCE # 1			
Last Name/ First Name			_
Street Address			Home Phone
City and State Zip Code		Relationship	
REFERENCE # 2			
Last Name/ First Name			
Street Address			
City and State Zip Code		Relationship	
REFERENCE # 3			
Last Name/ First Name			
Street Address			
City and State Zip Code			
I understand and agree that:			
falsification of information of employment.  2.)  Landscape is contingent u including assessment testing Assessment tests and refe Landscape). I authorize an about my employment receperformance, abilities and cand all liability for damages  3.)  employment, TLC Landsca consumer report for the preputation, personal charact informed whether an invest the investigation.  4.)  rules, regulations, and proemployment, and compens Landscape. I further und Landscape has any authorit make any agreement differenforceable unless it is in w  *Note: Federal law requires the compliance with such laws, employment is subject to verification.	pon my successful g, if appropriate, and rence results will and request that those cord, including a softher qualities pertire arising from furnist arising and prior concedures of TLC and a terminal that no may to enter into any to enter into any the enterior contrary to the first and signed by that employers hire on TLC Landscape will first and for the application of the application of the application.	Pre-Employment completion of the company's d TLC Landscape receiving reference individuals I have listed as we tatement of the reasons for the ent to my qualifications for emhing the requested information.  Investigative Region information in the information that I have properly may be information. Investigative Region information in the information. I understand that upport was requested and given for the information in the in	will: I agree to comply with the policies I am an employee at will and that my notice, at any time, at the option of TLC ecompany other than the owner of TLC ment for any specified period of time or to any such agreement, if made, shall not be discape.
Print Name	Si	gnature	Date