



APPLICATION FOR EMPLOYMENT

AN EQUAL OPPORTUNITY EMPLOYER

This application form is intended for use in evaluating your qualifications for employment. This is not an employment contract. All qualified applicants are considered for positions without regard to race, color, national origin, religion, ancestry, age, creed, sex, sexual orientation, marital status, veteran status, disability, or other protected statuses. It is our intention that all qualified applicants are given equal opportunity and that selection decisions be based on job-related factors.

 Last Name First Name Preferred Phone # Email

 Present Address City State Zip

Do you understand that you are applying for a Seasonal position? Yes ___ No ___

Are you able to work both Saturday and Sunday when required? Yes ___ No ___

Are you willing to work overtime? Yes ___ No ___

Most positions require you to work some Saturdays and Sundays; are you willing to do so? Yes ___ No ___

Have you ever applied to Tagawa Gardens? Yes ___ No ___

Have you ever been employed by Tagawa Gardens? Yes ___ No ___

If yes, provide approximate dates of employment and reason for separation from employment. _____

Please indicate department(s) from the list below, which you are interested in or have previous experience:

- | | | |
|--------------------------|----------------------------------|--------------------------------|
| ___ Annuals, Stocking | ___ Cashier | ___ Driver (Deliveries) |
| ___ Perennials, Stocking | ___ Receiving | ___ Store Support (Carry out) |
| ___ Roses | ___ Nursery (Shrubs, Trees) | ___ Guest Services/Gifts/Patio |
| ___ Garden Supplies | ___ Foliage/Houseplants/Aquatics | |

**** AN ESSENTIAL FUNCTION OF ALL DEPARTMENTS IS THE LIFTING AND CARRYING OF HEAVY MATERIALS. Are you able to lift 60 lbs. to your waist and carry it 10 feet? Yes ___ No ___**

**** Do you need any days off in the month of May; if so, when? _____**

AVAILABILITY:	MON	TUES	WED	THUR	FRI	SAT	SUN
From (start time)							
To (end time)							

If employed, do you expect to be engaged in any additional employment outside of our job? Yes ___ No ___
 If yes, give details: _____

DRIVER POSITION ONLY:

Are you at least 21 years of age and have a valid driver's license? Yes ___ No ___

Driver's License Number _____ Class of License _____ State Licensed In _____

Describe types and size of trucks you've previously driven: _____

Have you had your driver's license suspended or revoked in the last 3 years? Yes ___ No ___

If yes, give details: _____

List Name and Address of Schools Attended	# of Years	Diploma/Degree/Cert	Major/Subject
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High School or GED: _____

College or university: _____

Vocational or Technical: _____

What skills or additional training do you have that relate to the job for which you are applying? _____

PREVIOUS EMPLOYMENT

LIST YOUR EMPLOYMENT HISTORY BEGINNING WITH YOUR CURRENT OR LAST EMPLOYER

Employer		Telephone number		Address (Street, City, State)	
Title of Your Position	Date Started	Date Ended	Supervisor		Reason for leaving
Describe Work Performed					
Employer		Telephone number		Address (Street, City, State)	
Title of Your Position	Date Started	Date Ended	Supervisor		Reason for leaving
Describe Work Performed					

REFERENCES

PLEASE PROVIDE THREE REFERENCES - *NOT RELATIVES OR FORMER EMPLOYERS*

NAME	ADDRESS	PHONE

How did you learn about Tagawa Gardens job openings?

Tagawa Newsletter Facebook Indeed.com
 Tagawa Website Walk-in Tagawa Employee: _____
 Digital sign at Tagawa Gardens Other: _____

CERTIFICATION AND RELEASE

I certify that answers given by me to the foregoing questions and the statements made by me are complete and true to the best of my knowledge. I understand that any false information may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize investigation of all statements contained in this application as may be necessary in arriving at an employment decision. I authorize all former employers, persons, schools, companies and law enforcement authorities to release any information concerning my background and hereby release any said employers, persons, schools, companies and law enforcement authorities from any liability for any damages whatsoever for issuing this information.

I understand I may be required to successfully pass a drug screening examination. If hired, I understand I am required to abide by all rules and regulations of the company and that the use of alcohol or illegal drugs is prohibited during employment.

I understand that employment is contingent upon my providing documentation for completion of the Department of Homeland Security Employment Eligibility Verification Form I-9 and my ability to perform all functions pertaining to the job(s) for which I am hired.

I UNDERSTAND THAT THIS APPLICATION OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE A CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT CAUSE AND WITH OR WITHOUT NOTICE.

Applicants who are hired will be required to present documents verifying that they are authorized to work in the U.S.

I have read, understand, and by my signature, consent to these statements.

Applicant's Signature

Date

Parent/Guardian's Signature (if applicable)

Date