

Date Received _____

Received By _____

Code: VI I NI



Reminiscent Herb Farm,

Nursery & Landscaping, Inc.

1344 Boone Aire Road

Florence, KY 41042

859-525-8729

APPLICATION FOR EMPLOYMENT

Please Print Neatly

Last Name		First Name		Middle Initial	
Birth Date		Home Phone		Cell Phone	
Street Address		City & State		Zip	
Position Applying For			Date Available to Work		

Are you legally eligible for employment in the United States? ☐ Yes ☐ No

Note: If you are hired, you will be required to submit proof that you are eligible to work in the United States.

Are you over the age of 18? ☐ Yes ☐ No

Note: If no, hire is subject to verification that you meet minimum age requirements

Are there any job related experience, skills, or qualifications which will be of benefit in the job in which you are applying for?

Have you been convicted of a major crime (felony)? ☐ Yes ☐ No

If Yes, please give the conviction date and nature of the offense _____

Note: A conviction record will not necessarily bar employment

Reminiscent Herb Farm, Nursery & Landscaping, Inc. is an Equal Opportunity Employer and does not discriminate against race, color, national origin, sex, age, religion, sexual orientation, gender identity, veteran status, genetic information and disability in accordance with state and federal laws.

Employment History

Please list your current and previous employment starting with the most recent.

Name of Company		Employment Dates	From		To	
Address of Company		Rate of Pay	Start		End	
Phone Number		Name of Supervisor				
Reason for Leaving		May We Contact	[] Yes [] No			
Describe Your Responsibilities						

Name of Company		Employment Dates	From		To	
Address of Company		Rate of Pay	Start		End	
Phone Number		Name of Supervisor				
Reason for Leaving		May We Contact	[] Yes [] No			
Describe Your Responsibilities						

Name of Company		Employment Dates	From		To	
Address of Company		Rate of Pay	Start		End	
Phone Number		Name of Supervisor				
Reason for Leaving		May We Contact	[] Yes [] No			
Describe Your Responsibilities						

Name of Company		Employment Dates	From		To	
Address of Company		Rate of Pay	Start		End	
Phone Number		Name of Supervisor				
Reason for Leaving		May We Contact	[] Yes [] No			
Describe Your Responsibilities						

Education

School	Name & Address of School	Course of Study	Circle Years Completed				Did You Graduate	List Diploma or Degree
High			1	2	3	4	[] Yes [] No	
College			1	2	3	4	[] Yes [] No	
Other			1	2	3	4	[] Yes [] No	

References

Please list your personal references below. (Please no former employers or relatives)

Name	Address	Phone Number	Relationship

May we telephone you to follow up on this application at Home? [] Yes [] No Best time to call _____

May we telephone you to follow up on this application at Work? [] Yes [] No Best time to Call _____
Number you may be reached at work _____

Please Read and Sign Below

The facts set forth in my application for employment are true and complete. I understand that if employed, any false statement on this application may result in my dismissal. I further understand that this application is not and is not intended to be a contract of employment, nor does this application obligate the employer in any way if the employer decides to employ me. I understand and agree that my employment is at-will and can be terminated by either party with or without notice, at any time, for any reason or no reason. No one other than an officer of the Company has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing and then only in writing signed by an officer.

Signature of Applicant

Applicant—Do Not Write on This Page

Interview

Interviewer	Date	Comments

Employer Reference Check

Employer	Date	Comments

Personal Reference Check

Name	Date	Comments