



**GREENHOUSE, GARDEN CENTER, NURSERY & PATIO**

9170 West 52<sup>nd</sup> Avenue Arvada, CO 80002 303-424-7979  
fax: 303-424-1125 email: HR@echters.com [www.echters.com](http://www.echters.com)

An Equal Opportunity Employer

## Application For Employment

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, ancestry, age, creed, sex, sexual orientation, marital status, veteran status, or the presence of disabilities. **Applicants must be at least 15 years old.** Please complete the entire application. You will be contacted **only** if we wish to schedule an interview. **Note: Smoking on the job is prohibited.**

(PLEASE PRINT)

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
(Last) (First) (Middle)

Present Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Age (if under 18): \_\_\_\_ If hired, can you provide proof you are eligible for employment in the U.S.? Y N

Circle position(s) applying for: Growing, Transplanting, Cashier, Sales, Building Maintenance, General Labor,

Carry-out, Other \_\_\_\_\_ Specify Preference: \_\_\_\_\_

Rate of pay expected: \_\_\_\_\_ Type of work desired: Full-Time \_\_\_\_\_ Part-Time \_\_\_\_\_

If P/T, specify days and hours desired: \_\_\_\_\_

Will you accept a seasonal position? \_\_\_\_\_ Available for overtime? Y N Available start date: \_\_\_\_\_

**(ALL POSITIONS REQUIRE WORKING SOME SATURDAYS AND SUNDAYS)**

Are you able to work both Sat. and Sun. when required? \_\_\_\_\_

Will you need to request any special time off prior to July ? Y N Dates: \_\_\_\_\_

Are you employed now? \_\_\_\_\_ If yes, may we inquire of your present employer? \_\_\_\_\_

Are you subject to lay-off and/or recall? \_\_\_\_\_

Have you ever been discharged or forced to resign from a job? \_\_\_\_\_ If yes, Please explain: \_\_\_\_\_

Do you have a valid Colorado Driver's License? \_\_\_\_\_ Driver's License Number: \_\_\_\_\_  
(For maintenance/driver positions only)

**(TURN TO NEXT PAGE)**

(2)

How did you hear about job openings at Echter's?

\_\_\_\_ Newspaper Ad – which paper? \_\_\_\_\_ Sign on the door \_\_\_\_ Friend \_\_\_\_ Other \_\_\_\_

Do you know anyone working at Echter's? Y N List name(s): \_\_\_\_\_

Referred by Echter's employee? Y N Name: \_\_\_\_\_

Why did you choose to apply at Echter's? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What are your long term goals? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What experiences, skills or qualifications especially fit you for work at Echter's? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you been convicted of, or served time for a felony in the past seven years? Y N

If so please explain \_\_\_\_\_

\_\_\_\_\_

**AN ESSENTIAL FUNCTION OF THE CARRY-OUT, MAINTENANCE AND GENERAL LABOR POSITIONS IS THE LIFTING AND CARRYING OF HEAVY MATERIALS.**

Are you able to lift 40 lbs to your waist and carry it 100 feet? Y N \_\_\_\_\_

Are you able to lift 80 lbs to your waist and carry it 100 feet? Y N \_\_\_\_\_

For some positions, being a good bi-lingual is a plus. Please list languages with which you are fluent

enough to help with translation: \_\_\_\_\_

## Education

School	Dates From/To	Name, City, State	Graduate	Degree
<u>High School</u>	____/____	_____	Y N	_____
<u>Business/Technical</u>	____/____	_____	Y N	_____
<u>College</u>	____/____	_____	Y N	_____
<u>Other</u>	____/____	_____	Y N	_____

# Previous Employment

Starting with your current or last employer list the jobs you've held for the past seven (7) years. **Complete this section even if you attach a resume.** Attach a separate sheet if you need additional space.

<b>(1) Present or Most Recent Employer</b>		<b>Telephone Number</b>		<b>Address (Street, City, State)</b>		
<b>Title of Your Position</b>	<b>Date Started</b>	<b>Date Ended</b>	<b>Salary Started</b>	<b>Salary Ended</b>	<b>Supervisor</b>	<b>Reason for Leaving</b>
<b>Describe Work Performed</b>						
<b>(2) Employer</b>		<b>Telephone Number</b>		<b>Address (Street, City, State)</b>		
<b>Title of Your Position</b>	<b>Date Started</b>	<b>Date Ended</b>	<b>Salary Started</b>	<b>Salary Ended</b>	<b>Supervisor</b>	<b>Reason for Leaving</b>
<b>Describe Work Performed</b>						
<b>(3) Employer</b>		<b>Telephone Number</b>		<b>Address (Street, City, State)</b>		
<b>Title of Your Position</b>	<b>Date Started</b>	<b>Date Ended</b>	<b>Salary Started</b>	<b>Salary Ended</b>	<b>Supervisor</b>	<b>Reason for Leaving</b>
<b>Describe Work Performed</b>						
<b>(4) Employer</b>		<b>Telephone Number</b>		<b>Address (Street, City, State)</b>		
<b>Title of Your Position</b>	<b>Date Started</b>	<b>Date Ended</b>	<b>Salary Started</b>	<b>Salary Ended</b>	<b>Supervisor</b>	<b>Reason for Leaving</b>
<b>Describe Work Performed</b>						

## Military Service

Were you in the U.S. Armed Services, Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, what Branch \_\_\_\_\_

Dates of Duty: From \_\_\_\_\_ To \_\_\_\_\_ Rank at discharge \_\_\_\_\_  
Month Day Year                      Month Day Year

List duties in the service, including special training \_\_\_\_\_

**(TURN TO NEXT PAGE)**

# Certification and Release

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I certify that answers given by me to the foregoing questions and the statements made by me are complete and true to best of my knowledge. 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 damage whatsoever for issuing this information.

In the event of employment, I understand that false information, omissions or misrepresentations in my employment application or interview(s) may result in termination at anytime during my employment. 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. **If offered employment, I am willing to submit to drug testing to detect the use of illegal drugs as required by company policy.**

I understand that employment is contingent upon my providing documentation for completion of the Immigration and Naturalization Service form I-9 and my ability to perform the essential functions of the job. If hired, I understand and agree my employment is for no definite period and may, regardless of date of payment of my wages and salary, be terminated at any time without prior notice.

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**Signature** (application not acceptable unless signed)

**Date**

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**DO NOT WRITE BELOW THIS LINE**

Interviewed By: \_\_\_\_\_ Date Interviewed \_\_\_\_\_

Remarks: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date Hired: \_\_\_\_\_ Job Title: \_\_\_\_\_ Salary \_\_\_\_\_

Supervisor: \_\_\_\_\_ Start Date and Time: \_\_\_\_\_

Comments for Supervisor: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_