



Employment Application

To apply for one of our job openings, please complete the following form.

Only complete applications will be reviewed.

Application can be emailed to mjrservices@ymail.com or mailed to the following address:

MJR Services P.O. Box 320652 Franklin, WI 53132

Personal Information

First Name

Middle Name

Last Name

Address

City

State

Zip Code

Phone Number

Email

Birthdate

Gender

Male Female

Are you a citizen of the United States?

Yes No

If no, are you legally allowed to work in the United States?

Yes No

Have you ever been convicted of a felony or misdemeanor?

Yes No

If so, please explain:

Availability

Position you are applying for

Type of employment desired

Full Time Part Time Temporary Seasonal

Are you currently working?

Yes No

When are you able to start work?

During a typical work week, what is your availability like?

whenever needed limited hours limited days

If limited hours or days, please explain

Are you okay working overtime?

Yes No

Driving Information

Do you have a valid driver's license?

Yes No

Do you have a CDL?

Yes No

State driver's license is issued in

Driver's license number

Has your license ever been suspended or revoked?

Yes No

Do you have reliable transportation to and from work?

Yes No

Experience

Number of years experience in the landscape industry

none 1-2 years 3-5 years 6-9 years 10+ years

What type of equipment do you have experience using?

Briefly describe any knowledge you have in the landscape industry (i.e. turf grass management, shrub trimming/ pruning, mulching, spring/fall clean-ups, basic plant knowledge, hardscape installation, planting trees/ shrubs)?

Are you certified as a commercial pesticide applicator?

Yes No

Employment History

Have you ever been terminated or asked to resign from a job?

Yes No

If yes, please explain

PRIOR EMPLOYMENT #1- MOST RECENT/ CURRENT JOB

Company

Date employed from

Date employed to

Address

Phone number

Position

Job responsibilities

Starting wage

Ending wage

Supervisor

May we contact this employer for a reference?

Yes No

PRIOR EMPLOYMENT #2

Company

Date employed from

Date employed to

Address

Phone number

Position

Job responsibilities

Starting wage

Ending wage

Supervisor

May we contact this employer for a reference?

Yes No

References

Please list two references that are not related to you and are not previous employers.

REFERENCE #1

Name

Address

Phone Number

REFERENCE #2

Name

Address

Phone Number

Applicant Consent

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that if employed, falsified statements on this application will be grounds for dismissal. I understand and agree that MJR Services will verify all or part of the information that I have provided in this application. I understand that this verification may include any inquiry into my motor vehicle driving record, criminal and civil records, prior employment (including contacting prior employers), as well as other public record information. I authorize the release of such information as may be necessary to verify the information I have provided. I release and hold harmless from all liability any individual or entity requesting or supplying information with respect to my application. I understand this application is valid 180 days from the date submitted, and if I choose to be considered after that allotted amount of time, I will submit a new application.

Do you agree to this information?

Yes No

Signature

Date