

**Johnson's Nursery, Inc.**  
Equal opportunity employer



W180 N6275 Marcy Road Menomonee Falls, WI 53051  
(262)252-4988

**Application For Employment**

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

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ M.I.: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Date Available: \_\_\_\_\_

Position Applied For: \_\_\_\_\_ Desired Salary: \_\_\_\_\_

How Did You Hear About Us?: \_\_\_\_\_

Are you a citizen of the United States?:  Yes  No

If no, are you authorized to work in the U.S.?  Yes  No

Have you ever worked for this company?  Yes  No

Have you ever been convicted of a felony?  Yes  No

If yes, explain: \_\_\_\_\_

**Education:**

High School: \_\_\_\_\_ Did you graduate?  Yes  No

College: \_\_\_\_\_ Did you graduate?  Yes  No

Degree focus: \_\_\_\_\_

Other: \_\_\_\_\_ Did you graduate?  Yes  No

**Military Service:**

Branch: \_\_\_\_\_ Rank at Discharge: \_\_\_\_\_

Type of Discharge: \_\_\_\_\_

Johnson's Nursery, Inc<sup>TM</sup> does not discriminate on the basis of race, color, religion, national origin, gender, sexual orientation, age, or disability in admission or access to, or treatment or employment in, its programs and activities.

**Previous Employment:**

Company:		Phone #:	
Job Title:		Supervisor:	
Salary Starting:	Salary Ending:	From:	To:
Responsibilities:			
Company:		Phone #:	
Job Title:		Supervisor:	
Salary Starting:	Salary Ending:	From:	To:
Responsibilities:			
Company:		Phone #:	
Job Title:		Supervisor:	
Salary Starting:	Salary Ending:	From:	To:
Responsibilities:			

**Personal Information:**

Are you able to work 40+ hours a week, including some weekends?  Yes  No

Do you possess any licenses or certifications that would be beneficial to the organization?

Please list, \_\_\_\_\_

Do you have experience operating machinery? \_\_\_\_\_

Describe: \_\_\_\_\_

Do you have other skills you wish to mention? \_\_\_\_\_

Do you have a CDL?  Yes  No      What restrictions? \_\_\_\_\_

Do you have a valid drivers license?  Yes  No

**Reference:**

Name of reference:
Occupation:
Address:
Telephone:

**Disclaimer and Signature:**

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature:	Date:
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