

CHRISTMAS TREES | PUMPKIN PATCH | EVENT CENTER

# AVAILABILITY FOR EMPLOYMENT

\_\_\_\_\_  
*First Name M.I. Last Name Today's Date mm/dd/yyyy*

\_\_\_\_\_  
*Street Address Apt. # Email Address*

\_\_\_\_\_  
*City State ZIP Code Cell Phone #*

Have you ever been employed for Pronzini Farms before? YES  NO  Year: \_\_\_\_\_  
 Do you need a work permit? YES  NO

**If you are 18 years of age or younger and are still in high school, you will need a work permit.**

**DAYS AND HOURS AVAILABLE**

MONDAY	From: _____	To: _____
TUESDAY	From: _____	To: _____
WEDNESDAY	From: _____	To: _____
THURSDAY	From: _____	To: _____
FRIDAY	From: _____	To: _____
SATURDAY	From: _____	To: _____
SUNDAY	From: _____	To: _____

Notes to Manager: \_\_\_\_\_

**In case of an emergency please contact:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

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# Employment Application

## Applicant Information

Full Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

First M.I. Last

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

Street Address

Apartment/Unit #

City

State

ZIP Code

Date of Birth: \_\_\_\_\_ Email: \_\_\_\_\_

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

What type of position:  Full Time  Part Time Are you able to meet the attendance requirements of this *seasonal* position?  YES  NO

Are you a citizen of the United States?  YES  NO If NO, are you authorized to work in the U.S.?  YES  NO  
(If hired, verification will be required by law)

Have you ever worked for Pronzini Farms?  YES  NO If YES, when? \_\_\_\_\_

## School Most Recently Attended

Name: \_\_\_\_\_ Current Grade Level: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Telephone: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Now enrolled?  YES  NO Graduated?  YES  NO

Sports, Clubs or Activities? \_\_\_\_\_

## Most Recent Employment

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Position: \_\_\_\_\_ Salary: \$ \_\_\_\_\_

Dates Worked From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference?  YES  NO **Mgmt. ref. ck. done by:** \_\_\_\_\_

## References (Please do not use family members)

Name: \_\_\_\_\_ Years Known: \_\_\_\_\_

First Last

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

Street Address

Apartment/Unit #

City

State

ZIP Code

Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Years Known: \_\_\_\_\_

First Last

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

Street Address

Apartment/Unit #

City

State

ZIP Code

Phone: \_\_\_\_\_

## Disclaimer and Signature

I CERTIFY THAT I HAVE READ AND FULLY COMPLETED THIS APPLICATION AND THAT THE INFORMATION CONTAINED HEREIN IS CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY OMISSION OR FALSE INFORMATION IS GROUNDS FOR DISMISSAL. I AUTHORIZE THE REFERENCES LISTED ON THIS APPLICATION TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND PERTINENT INFORMATION THEY MAY HAVE, PERSONAL AND OTHERWISE. I UNDERSTAND THAT AS A PART OF THE PROCEDURE FOR MY EMPLOYMENT APPLICATION AN INVESTIGATIVE CONSUMER REPORT MAY BE MADE CONCERNING MY CHARACTER, GENERAL REPUTATION, PERSONAL CHARACTERISTICS AND MODE OF LIVING.

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

**WE ARE AN EQUAL OPPORTUNITY EMPLOYER**