



21150 Hwy 30
 Filer, Idaho 83328
 Office: 208-326-2100 · Fax: 208-326-2107

Personal Information			
Last Name	First Name	Middle Name	Today's Date
Street Address	City	State	Zip Code
Home Phone: (____) _____ - _____	Are you a United States Citizen or legally eligible to work in the U. S.? ____Yes ____No <i>(if hired, you will be required to provide documentation that you are eligible to work in the U.S.)</i>		
Work Phone: (____) _____ - _____			
Other: (____) _____ - _____			
Are you 18 or over? ____Yes ____No			
Title of Position Applying For			Date Available to Work
Do you have any relatives currently working for Southern Idaho Landscape Center? ____Yes ____No If yes, list names and relationship to you:			
Are you employed now?		If so, may we contact your present employer?	

Education			
Name and Location	# Years Completed	Major Area of Study	Degree/Diploma
High School			
College			
Technical or Certificate Programs			

Physical Restrictions
Do you have any physical condition which may restrict your performance of the following duties in the job which you are applying? (Physical duties include: standing eight (8) hours, walking, stooping, bending, lifting, climbing, reaching, high pace working speed.) ____Yes ____No
If yes, please explain:

If required are you willing to lift objects weighing up to 50 LBS? ___Yes ___No

If required are you willing to lift objects weighing up to 100 LBS? ___Yes ___No

Employment History

Employer:	Dates Employed: From_____ To_____	Job Title:
Address:		
Telephone:	Job Duties:	
Weekly Pay Start: Finish:		
Reason for Leaving:		

Employer:	Dates Employed: From_____ To_____	Job Title:
Address:		
Telephone:	Job Duties:	
Weekly Pay Start: Finish:		
Reason for Leaving:		

Employer:	Dates Employed: From_____ To_____	Job Title:
Address:		
Telephone:	Job Duties:	
Weekly Pay Start: Finish:		
Reason for Leaving:		

Describe your qualifications for the type of employment you are seeking: (Please include skills, special training, etc.)

References Please list names of supervisors, managers, or others who can comment directly on your abilities:				
Name	Address	Phone #	Relationship/Occupation	Years Known

Please indicate whether you hold the following valid drivers licenses:

Class A _____ Class B _____ Class C _____

Drivers License Number: _____ State Issued: _____

Southern Idaho Landscape Center is an Equal Opportunity Employer. It is the policy of Southern Idaho Landscape Center not to discriminate in employment matters on the basis of race, creed, color, age, marital status, national origin, sex, or status with regard to public assistance or disability.

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if employed, false statements on this application shall be considered sufficient cause of dismissal. You are hereby authorized to make investigation of my personal references.

Signature of Applicant

Date