

APPLICATION FOR EMPLOYMENT



This company is an Equal Employment Opportunity Employer – M/F/D/V

The Garden Gnome, L.L.C., dba The Pond Gnome, an Arizona limited liability company, its subsidiaries and divisions, has specific policies regarding employee and applicant honesty, performance, conduct and attendance. Additionally, The Garden Gnome, L.L.C., reserves the right to investigate any unethical or illegal activities including, but not limited to, falsification of records, the use, sale or possession of alcohol or drugs while working or working under the influence of alcohol or drugs, unexcused absences, and the like. According to our policies, involvement in such activities will result in disciplinary action by The Garden Gnome, which could include termination and prosecution. Please answer all questions completely and accurately. Incomplete applications may not be considered.

Personal Information

_____	_____	_____	_____
Last Name	First Name	Middle	Social Security #

_____	_____	_____	_____	_____
Street / P.O. Box	Apt. #	City	State	Zip

_____	_____	_____
Home Telephone #	Cell #	Business Telephone #

If you are under 18 years of age, do you have a work permit? Yes No

Are you prevented from legally becoming employed in this country because of Visa or Immigration Status? Yes No

Proof of citizenship or immigration status will be required upon employment.

Have you ever worked under a name different than currently used? Yes No

If so, please state name(s): _____

Have you ever been convicted of a crime or violation other than a minor traffic infraction?

Yes No

(A conviction record will not necessarily be a bar to employment. Factors such as job relations, age and time of the offense, seriousness, and nature of violation, etc. will be taken into account).
If yes, please explain: _____

Have you ever applied for a position with this company before? Yes No When? _____

How were you referred to our company? _____

Employment Desired

What position are you applying for: _____

When are you available to start? _____ What is your desired salary? _____

Are you employed now? Yes No If so, may we contact your present employer? _____

Do you have any problems with traveling, if required? Yes No

Education

	Name and Location of School	# of years attended	Did you graduate	Subjects studied or Name of Degree
High School				
College				
College, Trade or Business				

List any courses taken that may be applicable to the position for which you are applying: _____

List any additional interests, skills, or qualifications that you possess that you feel qualify you for the position for which you are applying: _____

Please list computer software and word processing packages you are familiar with and level of proficiency: _____

Employment History (may attach resume instead of filling out this portion)

Most recent or Present Employer:

Name of Employer _____ Type of Business _____ Telephone (required) _____

Address: Street _____ City _____ State / Zip _____ Supervisor's name _____

From: _____ To _____ Starting: _____ End: _____ Full / Part-time _____

Dates Employed _____ **Salary** _____ **Status** (circle) _____

Description of work duties: _____

Reason for Leaving: _____

Next Previous Employment:

Name of Employer _____ Type of Business _____ Telephone (required) _____

Address: Street _____ City _____ State / Zip _____ Supervisor's name _____

From: _____ To _____ Starting: _____ End: _____ Full / Part-time _____

Dates Employed _____ **Salary** _____ **Status** (circle) _____

Description of work duties: _____

Reason for Leaving: _____

Other Employment:

Name of Employer _____ Type of Business _____ Telephone (required) _____

Address: Street _____ City _____ State / Zip _____ Supervisor's name _____

From: _____ To _____ Starting: _____ End: _____ Full / Part-time _____

Dates Employed _____ **Salary** _____ **Status** (circle) _____

Description of work duties: _____

Reason for Leaving: _____

Have you ever been suspended or placed on probation for attendance, tardiness or work-related performance? Yes No If yes, please explain: _____

FOR THOSE APPLYING FOR A POSITION INVOLVING DRIVING:

1. Are you over the age of 25? Yes No
1. Do you have a valid Driver's License? Yes No
2. Can you provide proof of auto insurance? Yes No
3. Have you had any traffic convictions or citations within the last 36 months? Yes No

I certify all information given on this application and any supporting information is true and complete, and I authorize a complete investigation. I agree that, if hired, I may be dismissed if The Garden Gnome, L.L.C., at any time, learns of any falsification or material omission in the information I have provided, and if discovered prior to hire, I would be ineligible for consideration for not this position but future positions as well. I understand my employment with The Garden Gnome, L.L.C. is "at will" and may be terminated by The Garden Gnome, L.L.C. or me at any time, with or without notice, and with or without cause. I authorize The Garden Gnome, L.L.C. to contact all former and current employer references listed and all educational institutions. I hereby release this company and all references from any liability, which might be claimed because of information provided, by such references. In the event of my employment, I agree to follow the rules and policies of The Garden Gnome, L.L.C. and acknowledge that these rules and policies may be changed, interpreted, withdrawn, and/or overridden by The Garden Gnome, L.L.C. at any time and without prior notice to me.

Signature of Applicant **Date**

Work Availability

What type of position are you applying for?

Part-time

Full-time

Summer

Temporary

How many hours a week do you prefer to work? _____

Would you be willing to work additional hours? Yes No

Do you foresee a change in your availability? Yes No

If so, please explain: _____

If applying for a summer or temporary position, please list the dates you are available to work: ____

If applying for a part-time position, please list below the hours you are available to work:

MONDAY: _____

TUESDAY: _____

WEDNESDAY: _____

THURSDAY: _____

FRIDAY: _____

The Garden Gnome, L.L.C.

DRUG TEST AUTHORIZATION

In consideration for employment with The Garden Gnome, L.L.C., I authorize The Garden Gnome, L.L.C., to conduct a pre-employment drug screen.

I understand my employment may be denied or terminated based upon the results of the drug screen. In this event, I understand I will be provided a copy of the results. I also understand the drug screening may be conducted throughout the tenure of my employment, either at random or based on reasonable suspicion, in which I will willfully participate to remain an active employee with The Garden Gnome, L.L.C.

This authorization releases The Garden Gnome, L.L.C. from any and all liability for damages arising from the results of the drug screen. Further, it releases and discharges all liability from any and all employees at The Garden Gnome, L.L.C., private or public hospitals, clinics or medical facilities, or corporations responsible for providing drug screen results.

The signature allows a photocopy or fax of this authorization to be as valid as the original.

Please print clearly the following information:

Full name: _____

City, State, Zip: _____

Social Security #: _____ - _____ - _____

Signature of Applicant

Date

The Garden Gnome, L.L.C.

REFERENCE AUTHORIZATION

I, _____, authorize The Garden Gnome, L.L.C. to contact any previous employers to obtain reference information regarding my previous employment history. I also authorize The Garden Gnome, L.L.C. to contact various sources to verify my education credentials. I understand that this information is necessary in determining the status of my application. I also understand that I will not be considered for a position with The Garden Gnome, L.L.C. without this signed authorization form.

Signature of Applicant

Date

APPLICANTS:

To aid in our Recruitment Outreach Program and remain within our Federal and State record-keeping guidelines, we would appreciate your compliance in completing the **voluntary** information below.

This information is confidential, will be kept separate from your application, and will not affect your consideration for employment.

_____	_____
Name	Social Security Number
_____	_____
Position Applying for	Date

PLEASE CHECK THE APPROPRIATE DESIGNATIONS:

- 0 _____ WHITE
- 1 _____ BLACK
- 2 _____ ASIAN / PACIFIC ISLANDER: Persons having origins in any of the original peoples of the Far East, Southeast Asia, the Pacific Islands, or Indian Subcontinent.
- 3 _____ AMERICAN INDIAN / ALASKAN NATIVE: Persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.
- 4 _____ HISPANICS: Persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.

- MALE FEMALE FORTY YEARS OF AGE OR OVER
- VIETNAM ERA VETERAN DISABLED VETERAN (less than 30% disabled)
- SPECIAL DISABLED VETERAN (more than 30% disabled)
- DISABLED: Persons having a physical or mental impairment, which substantially limits one or more major life activities; persons having a record of such impairments, or regarded as having such impairments.

If you have any questions regarding this form, please contact the Human Resource Director

“An Equal Opportunity Employer – M/F/D/V”