

J.W. Townsend Inc., Landscape Contractor 3980 Seminole Trail Charlottesville, VA 22911 Office 434-973-1154 * Fax 434-973-1578

APPLICATION FOR EMPLOYMENT

J.W. Townsend Landscapes does not discriminate in employment with regard to race, color, religion, age, sex, national origin, disability status, genetics, protected veteran status, sexual orientation, gender identify, or any other characteristic protected by federal, state, or local laws.

PLEASE PRINT CLEARLY AND COMPLETE ALL SECTIONS.

FLLASL FIXINI CLLANLI AIN	D COIVIE	TELL ALL SECTIONS				
If you need help filling out this application form or for any phase						
you this form and every effort will be made to accon	nmodate yo	our needs in a reasonable amount of time.				
NAME (FIRST, MIDDLE, LAST)	TODAY'S DATE					
CURRENT ADDRESS (Street, City, State, Zip Code)						
RESIDENT ADDRESS (Street, City, State, Zip Code) (if different from above)						
EMAIL ADDRESS		PHONE NUMBER & BEST TIME TO CALL				
EMPLOYME	NT DESI	IRED				
POSITION APPLIED FOR:						
ARE YOU ABLE TO PERFORM THE ESSENTIAL FUNCTIONS OF THE	JOB FOR W	VHICH YOU ARE APPLYING FOR WITH OR WITHOUT A				
REASONABLE ACCOMMODATION?						
☐ Yes ☐ No						
	DATE AVAILABLE					
☐ FULL TIME ☐ PART TIME ☐ SEASONAL ☐ TEMPORARY						
HAVE YOU EVER WORKED FOR J.W. TOWNSEND LANDSCAPES BEFORE? Yes No		IF YES, WHEN AND IN WHICH DEPARTMENTS?				
HAVE YOU EVER APPLIED TO J.W. TOWNSEND LANDSCAPES BEFORE? \square Yes \square No		IF YES, WHEN?				
To comply with the Immigration Reform and Control Act of 1986, if you identity and your authorization to be employed in the United States. Sug following your hire, or upon your first work day if your employment periods.	ch document	its will be required within the first three (3) business days				
HOW WERE YOU REFERRED TO J.W. TOWNSEND LANDSCAPES?						

HAVE YOU EVER BEEN CONVICTED OF A CRIME (MISDEMEANOR OR FELONY)? ☐ Yes ☐ No						
IF YES, EXPLAIN (Where	e, When, Sentence):					
Disclosure of a criminal re	scord will not necessarily di	squalify you for employment. Each c	onviction will be evaluate	ad an its own marits with		
		lation to the job for which you are a		ed on its own ments with		
		RECORD OF EDUCATIO	N			
NAME AND LOCATION OF SCHOOL		L GRADUATED	DEGREE	MAJOR OR FIELD OF STUDY		
		□ Yes				
HIGH SCHOOL		□ No				
		□ Yes				
COLLEGE		□ No				
TRADE, BUSINESS OR CORRESPONDENCE		☐ Yes ☐ No				
SCHOOL						
		IONS YOU BELONG TO, AS WELL	AS SKILLS, TRAINING, (OR EXPERIENCE THAT		
WOULD ENHANCE YOU	IR ABILITY TO PERFORM	THE POSITION APPLIED FOR				
DO VOLLBOSSESS A VAL	LID DRIVER'S LICENSE? [J Vos. □ No.				
DO 100 POSSESS A VAI	LID DRIVER 3 LICENSE? L	⊥ res ∟ no				
DRIVER'S LICENSE NUM	IBER AND STATE					
HAVE YOU EVER BEEN A MEMBER OF THE ARMED FORCES OF THE UNITED STATES? ☐ Yes ☐ No						
THATE TOO EVEN DEED A MILMIDEN OF THE ANNIED FONCES OF THE OMITED STATES! - 165 - NO						
IF YES, LIST ANY SPECIAL SKILLS OR ABILITIES YOU DEVELOPED WHILE IN MILITARY SERVICE THAT DIRECTLY RELATE TO THE						
POSITION APPLIED FOR.						
		REFERENCES				
INDIVIDUALS FAMILIAR WITH YOUR WORK ABILITY – DO NOT INCLUDE RELATIVES						
NAME		PHONE NUMBER	RELATI	ONSHIP/YEARS KNOWN		

EXPERIENCE							
MOST RECENT EXPERIENCE FIRST							
NAME AND ADDRESS OF	STARTING	ENDING	DATES	SALARY		DEASON FOR LEAVING	
EMPLOYER	POSITION	POSITION	EMPLOYED	STARTING	ENDING	REASON FOR LEAVING	
1.			FROM				
			то				
EMPLOYER PHONE NUMBER:		NAME AND TITLE OF SUPERVISOR:					
2.			FROM				
			то				
EMPLOYER PHONE NUMBER:		NAME AND TITLE OF SUPERVISOR:					
3.			FROM				
			то				
EMPLOYER PHONE NUMBER:		NAME AND TITLE OF SUPERVISOR:					
4.			FROM				
			то				
EMPLOYER PHONE NUMBER:		NAME AND TITLE OF SUPERVISOR:					
MAY WE CONTACT THE EMPLOYERS LISTED ABOVE?							
If no, indicate by number which one(s) you do not want us to contact:							

Use this space to describe any previous work history and to detail particular job responsibilities listed above. Include any additional information that may be relevant to the job for which you are applying i.e., landscape training, landscape education, related equipment experience, etc.

CERTIFICATION AND RELEASE

I hereby certify that all statements made in this application are true and correct to the best of my knowledge and belief. I understand and agree that any misrepresentation or omission of facts in my application may be justification for refusal to hire, or termination of employment.

I further understand that an investigative report may be made as to my character and general reputation. I authorize all past employers, schools, persons and organization having relevant information or knowledge to provide it to J.W. Townsend Landscapes or its duly authorized representative for its use in deciding whether or not to offer me employment and specifically waive any required written notification. I hereby release employers, schools, persons and organizations from all liability in responding to inquiries in connection with my application.

I understand that nothing contained in this employment application or in the granting of an interview is intended to create and employment contract between J.W. Townsend Landscapes and me for either employment or for the providing of any benefit. If any employment relationship is established, I understand that my employment can be terminated, with or without cause, at the option of either J.W. Townsend Landscapes or myself.

In signing this form, I certify that I understand all the questions and statements in this application.								
SIGNATURE OF A	SIGNATURE OF APPLICANT			DATE				
Please send your completed application to hiring@townsendlandscape.com								
	FOR EMPLOY	/ED LICI	ONLV					
DATE APPLICATION RECEIVED		REFERRAL SOURCE						
INTERVIEWED BY DEPA		DEPARTI	DEPARTMENT					
REFERENCE CHECK COMPLETED (DATE, E	BY WHOM, AND RESULT							
ACTION AND REASON								
	IF H	IRED						
DEPARTMENT	POSITION			MANAGER				
START DATE	WAGE/SALARY		☐ Full-Time		DRIVER? ☐ Yes ☐ No			