



EMPLOYMENT APPLICATION

Mail this form with your resume to:

1310 McGee Ave • Berkeley, California 94703 • 510-526-4704

Berkeley Horticultural Nursery is an Equal Opportunity Employer which means that no person should be excluded from consideration on the basis of race, color, religion, sex, age, national origin, veteran's status, or visual, aural, mental or physical disability/handicap.

NAME	Last	First	Middle
ADDRESS			
CITY		STATE	ZIP
PHONE NUMBER		EMAIL ADDRESS	
DRIVERS LICENSE NUMBER		STATE ISSUED	
TYPE OF POSITION DESIRED			
SALARY EXPECTED		DATE AVAILABLE	

STATUS DESIRED			
Circle one:	FULL TIME	PART TIME	EITHER
Circle one:	REGULAR	TEMPORARY	EITHER
SHIFT DESIRED			
Circle one:	DAY	OTHER	
List any day(s) of the week or time(s) you would <i>not</i> be available for work			
ARE YOU 18 YEARS OR OLDER Circle one: YES NO			

Job History

NAME OF YOUR MOST RECENT EMPLOYER	
COMPLETE ADDRESS (Street, City, State)	
DATE HIRED (Month/Year)	DATE TERMINATED (Month/Year)
YOUR LAST TITLE	
REASON FOR LEAVING	

NAME OF YOUR PREVIOUS EMPLOYER	
COMPLETE ADDRESS (Street, City, State)	
DATE HIRED (Month/Year)	DATE TERMINATED (Month/Year)
YOUR LAST TITLE	
REASON FOR LEAVING	

NAME OF YOUR PREVIOUS EMPLOYER	
COMPLETE ADDRESS (Street, City, State)	
DATE HIRED (Month/Year)	DATE TERMINATED (Month/Year)
YOUR LAST TITLE	
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NAME OF YOUR PREVIOUS EMPLOYER	
COMPLETE ADDRESS (Street, City, State)	
DATE HIRED (Month/Year)	DATE TERMINATED (Month/Year)
YOUR LAST TITLE	
REASON FOR LEAVING	

Work References

NAME	TITLE	BUSINESS	PHONE NUMBER

Education & Licenses

HAVE YOU GRADUATED FROM HIGH SCHOOL? Circle one: YES NO	
COLLEGES OR VOCATIONAL SCHOOLS ATTENDED	
NAME & LOCATION OF SCHOOL	AREA OF STUDY

DO YOU HOLD ANY SPECIAL LICENSES, PERMITS OR CERTIFICATES?		
NAME OF LICENSE, PERMIT OR CERTIFICATE	ISSUED BY	EXPIRATION DATE

Special Skills

List any special skills or experiences that you feel would help you in the position that you are applying for.

Ability

Are you able to perform the job without special accommodations? List accommodations needed.

Applicant must read and sign

<p>I certify that all statements I have made on this application, or in any attachments by me, are true.</p> <p>I understand and agree that, should I be employed by Berkeley Horticultural Nursery, falsification or omission of any information provided on this form, or attachments to it, is sufficient grounds for termination of my employment with Berkeley Horticultural Nursery without incurring any liability or obligation.</p> <p>I further understand that, should I be employed by Berkeley Horticultural Nursery, my employment will have no specified duration and may be terminated at any time, with or without cause or reason, upon oral or written notice. Termination will be effective upon oral or written notice.</p> <p>I have read the above paragraphs, understand their importance and effect on my employment, and accept the same as conditions of my employment by Berkeley Horticultural Nursery.</p> <p>Today's Date _____ Applicant's signature _____</p>
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For office use only

Interviewed by	Status	Notes