

Bay Country Landscape & Maintenance Co.
P. O. Box 671
Elkton, Md. 21922



An Equal Opportunity Employer

PERSONAL DATA: Date: _____

Phone #: _____ Social Security Number: ____ - ____ - ____

Date of Birth: _____

Name: _____
Last First Middle

Present Address: _____
Number Street City State Zip

Previous Address: (if less than 3 years at present address)

Number Street City State Zip

Are you a U.S. Citizen? yes no If "no", do you have a registration card or a valid U.S. work permit? yes no

Do you have a current valid driver's license? yes no

JOB INFORMATION:

Position Preferred: Laborer Clerical Operator Other _____

Rate of Pay Acceptable: _____ Date Available: _____

Are you currently employed? yes no If yes may we refer to your present Employer? yes no

Have you ever worked for Bay Country Landscape or one of its subsidiaries? yes no
If yes, when _____ Where _____ Position _____

Applying for: Full time Part time Sub Contracting Seasonal

Are you willing to travel out of state if needed? yes no

EDUCATION:

School & Address	Date Graduated	Major	Degree
High School _____	_____	_____	_____
College _____	_____	_____	_____
Business _____	_____	_____	_____
Technical _____	_____	_____	_____

Special Skills or Training: _____

MILITARY SERVICE:

Have you ever served in the U.S. Armed Forces? yes no
 If yes, Branch _____ Rank Attained _____ From _____ To _____
 Honors or Awards _____
 Special Training _____

FORMER EMPLOYERS:

Please list below your last five employers, starting with the last one. Please fill out to completion.

Date Month and Year	Name/Address/Phone Number of Employer	Salary	Position	Reason for leaving
From: To:				
From: To:				
From: To:				
From: To:				
From: To:				

MEDICAL INFORMATION:

Bay Country Landscape & Maintenance Co. requires that each employee is physically qualified to perform the tasks required by the job. As a condition of employment each employee may be required to take a physical examination as necessary for the safety and welfare of the employee or fellow employees.

Do you have any disabilities? () yes () no If yes, explain_____

Have you ever been compensated for a work related injury? () yes () no
If yes, please explain_____

Are you currently, or have you during the past six months been under the care of a physician? () yes () no If yes, please explain_____

Bay Country Landscape & Maintenance Co. requires that each employee is free from the effects of drugs or alcohol while performing the tasks required by the job. As a condition of employment, each employee may be required to take a drug-screening test at the time of employment, or at any other time at the discretion of the company. Each applicant must answer and agree to the following:

I have taken the following prescription or non-prescription drugs during the past 30 days:

I hereby consent to a pre-employment drug and alcohol-screening test, and certify that, to the best of my knowledge, the foregoing answers are complete and correct. I understand and agree that any omission of this record may be cause for the disqualification of my application, or termination. Furthermore, if employed, I hereby authorize Bay Country Landscape & Maintenance co. to require me to take drug and alcohol screening tests in accordance with the current company policy covering drug and alcohol abuse. I understand that my refusal to take drug screening tests as required by the current company policy shall result in my immediate discharge.

Signature

Date

REFERENCES: (Do not list relatives)

Name & Address	Telephone	Years Known

Have you ever been convicted for a crime (other than traffic or other minor violations)?
[] yes [] no If yes, explain_____

Other special skills, knowledge or abilities, which support your qualifications for the position, which you are seeking_____

STATEMENT AND SIGNATURE:

In completing and submitting this application I understand and agree: That any misstatement of facts will be sufficient reason for immediate withdrawal of this application or, in the event of employment, is cause for termination. That my previous employers may be asked for information concerning my employment, character, ability and experience. That on this application, no question has been answered in such manner that can disclose any sex, race, color, religion, or national origin. That if employed, I may be required to furnish proof of age. I agree to abide by all rules/regulations set forth by Bay Country Landscape & Maintenance Co. That Bay Country Landscape & Maintenance Co. shall be entitled to receive reports concerning injury or illness from attending physicians and practitioners.

Signature

Date

DO NOT WRITE HERE (Corporation Use Only)

Application Accepted by _____ Logged by _____

Interview date/time _____ Date of Employment _____

Rate of Pay _____ Referral _____

Position _____

PRE INTERVIEW QUESTIONNAIRE

Name of the job applicant: _____

Date: _____

Position applied for: _____

1. What reasons do you have for applying for this job?

2. Why do you think you qualify for the position?

3. Do you know of any ways you can make a difference in this organization?

How would you propose to do that?

4. What do you know of our organization?

5. State your three most important values

6. Have you ever held a job in a similar position in another company?

If yes, what type of accomplishments or obstacles challenged you?

7. What is your definition of a satisfying job/work environment?

8. What excites you the most about the prospects of getting this job?

9. Do you have career prospects that are in line with this position?

If so, how do you think this position will help you advance those prospects?

10. What do you think will be your biggest contribution to our organization should you be hired for this position?
