

INTEGRITY TREE SERVICE

www.itreeservice.com – SLundahl@itreeservice.com – fax 602-788-0006



EMPLOYMENT APPLICATION

| APPLICANT INFORMATION | | | |
|--|--|--|--|
| Last Name | First | M.I. | Date |
| Address | | | |
| Email Address | Cell Phone | Home Phone | |
| How did you hear about Integrity Tree Service? | | | |
| Position Applied for | Date Available | Desired Salary | |
| Are you a citizen of the United States? | YES <input type="checkbox"/> NO <input type="checkbox"/> | If no, are you authorized to work in the U.S.? | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| Have you ever worked for this company? | YES <input type="checkbox"/> NO <input type="checkbox"/> | If so, when? | |
| Have you ever been convicted of a felony? | YES <input type="checkbox"/> NO <input type="checkbox"/> | If yes, explain | |

| EDUCATION | | | |
|-------------------|------------------------------|-----------------------------|--------|
| High School | City/State | | |
| Did you graduate? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Degree |
| College | City/State | | |
| Did you graduate? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Degree |
| Other | City/State | | |
| Did you graduate? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Degree |

| REFERENCES <i>Please list at least three PROFESSIONAL references. (Family members will not be contacted)</i> | |
|--|--------------|
| Full Name | Relationship |
| Company | Phone () |
| Full Name | Relationship |
| Company | Phone () |
| Full Name | Relationship |
| Company | Phone () |
| Full Name | Relationship |
| Company | Phone () |
| Full Name | Relationship |
| Company | Phone () |

| PREVIOUS EMPLOYMENT | | | |
|---|--------------------|--------------------|--|
| Company | | Phone () | |
| Address | | Supervisor | |
| Job Title | Starting Salary \$ | Ending Salary \$ | |
| Responsibilities | | | |
| From | To | Reason for Leaving | |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> | | | |
| Company | | Phone () | |
| Address | | Supervisor | |
| Job Title | Starting Salary \$ | Ending Salary \$ | |
| Responsibilities | | | |
| From | To | Reason for Leaving | |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> | | | |
| Company | | Phone () | |
| Address | | Supervisor | |
| Job Title | Starting Salary \$ | Ending Salary \$ | |
| Responsibilities | | | |
| From | To | Reason for Leaving | |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> | | | |

| PRODUCTION SKILLS | |
|---|---|
| <input type="checkbox"/> Tree Climbing Experience | <input type="checkbox"/> Climbing Equipment Owner |
| <input type="checkbox"/> Chipper Operation | <input type="checkbox"/> Ground Operations |
| <input type="checkbox"/> Stump Grinder Operation | <input type="checkbox"/> Spray Rig and Fertilization Techniques |
| <input type="checkbox"/> Chain Saw Operation | <input type="checkbox"/> Chain Saw Owner |
| <input type="checkbox"/> Other Tree Work Experience | <input type="checkbox"/> Other _____ |

If you answered yes to any of the above, please list total number years' experience and describe any additional training:

DRIVING EXPERIENCE (MUST BE 21 YEARS OF AGE OR OLDER)

| | |
|--|--|
| <input type="checkbox"/> Commercial Driver's License (CDL) | <input type="checkbox"/> Truck and Chipper |
| <input type="checkbox"/> Automatic Transmission | <input type="checkbox"/> Manual Multi-Speed Transmission |
| <input type="checkbox"/> Towing | <input type="checkbox"/> One Ton Truck |
| <input type="checkbox"/> Bucket Truck | <input type="checkbox"/> Two Ton Truck |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____ |

VEHICLE ACCIDENT RECORD (DRIVING POSITIONS ONLY – DO NOT DISCLOSE YOUR OWN INJURIES)

| Date of Accident | Nature of Accident | Fatalities | Injuries to Others |
|------------------|--------------------|------------|--------------------|
| | | | |
| | | | |
| | | | |

TRAFFIC CONVICTIONS FOR THE PAST 3 YEARS (DRIVING POSITIONS ONLY)

| Conviction | Date | Charge | Penalty |
|------------|------|--------|---------|
| | | | |
| | | | |
| | | | |

MILITARY SERVICE

| | | |
|----------------------------------|-------------------|----|
| Branch | From | To |
| Rank at Discharge | Type of Discharge | |
| If other than honorable, explain | | |

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

| | |
|-----------|------|
| Signature | Date |
|-----------|------|