



19001 Hull Street Rd Moseley, VA 23120  
 (804) 639-0311  
 www.yardworksva.com

## EMPLOYMENT APPLICATION

YARD WORKS considers applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status. YARD WORKS is an equal opportunity employer.

<b>Full Name (including middle name):</b>			
<b>Address:</b>			
<b>Phone Number:</b>		<b>Email Address:</b>	
<b>Social Security Number:</b>			

## EDUCATION

<b>High School:</b>		<b>City, State:</b>	
<b>Course/Major:</b>		<b>Completion Date:</b>	
<b>College:</b>		<b>City, State:</b>	
<b>Course/Major:</b>		<b>Completion Date:</b>	
<b>Other School:</b>		<b>City, State:</b>	
<b>Course/Major:</b>		<b>Completion Date:</b>	

## EMPLOYMENT HISTORY

\*Please list most recent employment first.

<b>Company Name &amp; Address:</b>			
<b>Phone Number:</b>		<b>Supervisor Name &amp; Title:</b>	
<b>Position:</b>		<b>Dates Worked (from/to):</b>	
<b>Duties/Responsibilities:</b>			
<b>Reason for leaving:</b>			
<b>May we contact this employer?</b>	Yes	No	

<b>Company Name &amp; Address:</b>			
<b>Phone Number:</b>		<b>Supervisor Name &amp; Title:</b>	
<b>Position:</b>		<b>Dates Worked (from/to):</b>	
<b>Duties/Responsibilities:</b>			
<b>Reason for leaving:</b>			
<b>May we contact this employer?</b>	Yes	No	



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Have you ever been discharged from any position? YES \_\_\_\_\_ NO \_\_\_\_\_

If you selected yes, please explain why you were discharged from the position:

\_\_\_\_\_

Have you ever been found guilty of a misdemeanor or felony? YES \_\_\_\_\_ NO \_\_\_\_\_

If you selected yes, please give dates and explain the nature of the conviction:

\_\_\_\_\_

(Conviction will not necessarily disqualify an applicant from employment.)

Have you been given a job description or had the essential requirements of the job explained to you? YES \_\_\_\_\_ NO \_\_\_\_\_

Do you understand these requirements? YES \_\_\_\_\_ NO \_\_\_\_\_

Can you perform the essential requirements of this job with or without reasonable accommodation? YES \_\_\_\_\_ NO \_\_\_\_\_

**PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING AND DATING THIS APPLICATION**

**APPLICANT'S CERTIFICATION AND ACKNOWLEDGEMENT**

In consideration of my employment, I hereby agree and acknowledge the following: I agree to conform to the Company's rules and regulations as they may be issued or modified from time to time. I certify that the information contained in this application is correct and complete to the best of my knowledge, and I understand that falsification, misrepresentation or omission of facts called for in this application is grounds for disqualification from further consideration or will result in termination of my employment without notice. I authorize an investigation of all information contained in this application and authorize the references and former employers listed above to give the Company any and all pertinent information they may have, personal or otherwise, and I hereby release all parties who provide such information from all liability and damages on account of having furnished said information including my personal character, habits, work record, etc. I understand and agree that my employment and compensation (if hired) is for no definite period of time and may, regardless of the date of payment of my wages or salary, be terminated with or without cause, and with or without notice, at any time, at my option or the option of the Company. I understand that this application is current for only ninety (90) days. At the end of that time, if I do not hear from YARD WORK, LLC., and still wish to be considered for employment, it will be necessary for me to fill out a new application.

**DRUG AND ALCOHOL TESTING**

In the event that the Company determines that I am eligible for an offer of employment, I understand that I may be required to participate in oral and/or urine testing for alcohol, chemical dependency or other substance abuse. I consent to administration of such testing and I understand that in addition to testing as a part of the application or hiring process, I may be subject to future random testing and testing "for cause," which may include involvement in job-related accidents, suspicious behavior, etc. I understand that in the event that I refuse to consent to such a test or violate the Company's drug and alcohol policy, or test positive for substance abuse or chemical dependency, my application for employment will be disqualified from further consideration or my employment will be terminated without notice. Accommodation will be made for the use of legally prescribed medication taken under the direction of a physician.

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_



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## REFERENCES

Please list at least three (3) professional references:

<b>Company Name:</b>	
<b>Contact Name &amp; Title:</b>	
<b>Relationship to Applicant:</b>	
<b>Contact Phone Number (and extension):</b>	
<b>Contact Email Address:</b>	

<b>Company Name:</b>	
<b>Contact Name &amp; Title:</b>	
<b>Relationship to Applicant:</b>	
<b>Contact Phone Number (and extension):</b>	
<b>Contact Email Address:</b>	

<b>Company Name:</b>	
<b>Contact Name &amp; Title:</b>	
<b>Relationship to Applicant:</b>	
<b>Contact Phone Number (and extension):</b>	
<b>Contact Email Address:</b>	