

# Landfare Ltd.

Application for Employment  
909 W. 3rd. Ave.  
Columbus, OH 43212

Landfare is an Equal Opportunity Employer, committed to employing individuals without regard to race, color, gender, age, veteran status, religion, national origin, sexual orientation or disability.

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## PERSONAL INFORMATION

Date of application: \_\_\_\_/\_\_\_\_/\_\_\_\_ Date you are available to start: \_\_\_\_/\_\_\_\_/\_\_\_\_

Position applied for: \_\_\_\_\_ Salary desired: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

Full Name: \_\_\_\_\_ SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Driver's License number: \_\_\_\_\_ State: \_\_\_\_\_

Current address: \_\_\_\_\_  
(street, city, and zip code please)

Previous address (if applicable) \_\_\_\_\_  
(street, city, and zip code)

Telephone number (Mobile): (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

(Other): (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Are you currently authorized to work in the United States of America?  yes  no

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## GENERAL INFORMATION

Have you ever been employed with Landfare Ltd. before?  yes  no

If yes, when? From \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

If yes, reason for leaving: \_\_\_\_\_

Have you ever applied for a position with Landfare before?  yes  no

If yes, when? \_\_\_\_/\_\_\_\_/\_\_\_\_

How did you learn of this position? \_\_\_\_\_

Are you employed now?  yes  no If yes, may we contact your employer?  yes  no

Contact person \_\_\_\_\_ title \_\_\_\_\_

Phone number (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

If we cannot inquire of your present employer, please explain why below:

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Who referred you to Landfare ltd? (Check all that apply)

Current employee     Newspaper     Flyer     Other (list below)

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Are you on layoff and subject to recall?     yes     no

If employed, does your employment require you to continue working, or restrict your activities after leaving your current employment, for any period of time?     yes     no

If yes, until what date? \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Are you 18 yrs. of age or older?     yes     no

Do you have any work schedule restrictions with regard to overtime, weekends, serving on-call?     yes     no

If yes please explain: \_\_\_\_\_  
\_\_\_\_\_

In case of emergency, name of person to contact:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone Number: (        ) \_\_\_\_\_ - \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone Number: (        ) \_\_\_\_\_ - \_\_\_\_\_

Are you physically and mentally capable of performing the essential duties of the position for which you are applying?

yes     no

If no, please explain: \_\_\_\_\_  
\_\_\_\_\_

Are you a veteran of the U.S. Uniformed Services?     yes     no

If yes, what branch(es)? \_\_\_\_\_

Have you ever been convicted of a crime other than a minor traffic violation?     yes     no

If yes please explain: \_\_\_\_\_  
\_\_\_\_\_

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(please note that a conviction record will not necessarily bar you from employment)

## EMPLOYMENT HISTORY

Please list your last five employers, beginning with your current or most recent employer

Date-Month/Year	Company Name & Address Phone Number & Contact Name	Position Held Wage/Salary	Reason for Leaving
From _____ / _____	_____	_____	_____
To _____ / _____	_____	_____	_____
	_____		_____
	_____		_____
From _____ / _____	_____	_____	_____
To _____ / _____	_____	_____	_____
	_____		_____
	_____		_____
From _____ / _____	_____	_____	_____
To _____ / _____	_____	_____	_____
	_____		_____
	_____		_____
From _____ / _____	_____	_____	_____
To _____ / _____	_____	_____	_____
	_____		_____
	_____		_____

**COMMENTS:** INCLUDE EXPLANATION OF ANY GAPS IN (EMPLOYMENT)

**EDUCATIONAL HISTORY**

<b>School</b>	<b>Name/Location</b>	<b>Number of Years Attended</b>	<b>Did You Graduate?</b>
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High School: \_\_\_\_\_  yes  no

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Trade/Technical School: \_\_\_\_\_  yes  no

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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College School: \_\_\_\_\_  yes  no

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Subject Studied: \_\_\_\_\_

\_\_\_\_\_

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**Please list special skills or training you possess which may be applicable to the position you are applying for:**

**REFERENCES**

(Please give the names of three (3) people, not related to you, whom you have known for at least one year who would vouch for your character)

Name	Address & Phone Number	Occupation & Number of Years Acquainted
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
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_____	_____	_____
_____	_____	_____

**Note: This application will be kept on file for 90 days**

