



Just Mowing Inc. Job Application

**We are a seasonal employee and only hire employees for working during the mowing season
Please fill out all information and mail to PO Box 9003, Erie PA 16505**

Personal Information:

First Name: _____ Middle Name: _____ Last Name: _____
Street Address: _____ City, State, Zip: _____
Home Phone: _____ Cell Phone: _____
Email: _____

Are you eligible to work in the United States? Yes No
If you are under 18, do you have an employment age certificate? Yes No
Do you have a vehicle to get to work? Yes No
Have you been convicted of a felony within the last five years? Yes No
If Yes, please explain: _____

Have you been convicted of Driving Under the Influence? Yes No
If Yes, please explain: _____

We do not allow smoking while working on a customers yard or in our vehicles. Will this be a problem for you? Yes No
Do you understand that we are a seasonal employer and you are applying for a temporary seasonal job which is only available between April to November? Yes No

Position/Availability:

Position applied for: _____
Are you applying for Full Time or a Part Time Position? (circle) Full Time Part Time

Days/Hours Available [check each day you are available and list all hours you could be available]

	<u>Available Hours</u>		<u>Available Hours</u>
Mon	_____	Fri	_____
Tue	_____	Sat	_____
Wed	_____	Sun	_____
Thur	_____		

What date are you available to start work? _____
What hourly rate do you want to start at? _____

Mowing Experience:

How many years experience do you have in commercial mowing? _____
Have you driven commercial dump truck with mowing trailers? Yes No
If Yes, please list type of vehicles drive and year experience: _____
Have you driving commercial riding/standing or walking mowers? Yes No
If Yes, please list type of machines and year experience: _____



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Please list any previous Landscaping employers:

1. Company: _____ Supervisor: _____ Phone: _____
Position Title: _____ From: _____ To: _____ Hourly Wage: _____
Reason for leaving: _____

2. Company: _____ Supervisor: _____ Phone: _____
Position Title: _____ From: _____ To: _____ Hourly Wage: _____
Reason for leaving: _____

Education:

Name and address of school - Degree/Diploma - Graduation Date

Skills and Qualification: Licenses, Skills, Training, Awards

Other Employment History:

1. Company: _____ Supervisor: _____ Phone: _____
Position Title: _____ From: _____ To: _____ Hourly Wage: _____
Reason for leaving: _____

2. Company: _____ Supervisor: _____ Phone: _____
Position Title: _____ From: _____ To: _____ Hourly Wage: _____
Reason for leaving: _____

Can we Contact your present employer? Yes No

References:

Name/Title/Address/Phone

Any other Comments: _____

I certify that information contained in this application is true and complete. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorized the verification of any or all information listed above.

Signature: _____ Date: _____

Please fill out all information, sign, and mail to PO Box 9003, Erie PA 16505