

# Loveland Garden Center & Nursery

1801 S. Lincoln Ave. Loveland CO. 80537 (970) 669-3577

## APPLICATION FOR EMPLOYMENT

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

All applications must be submitted in person by the applicant. Any applications submitted online or dropped off by friends or family will not be considered.

**PLEASE NOTE:** All positions at Loveland Garden Center require working Saturdays and/or Sundays. Hours will vary as demand for plant material is seasonal. All positions are temporary unless other arrangements are made. April, May and June are the busiest months at the garden center. Hours will be 9:00AM to 6:00PM.

Please describe your experience, knowledge, and/or training that would be used in a garden center setting. \_\_\_\_\_

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

Do you have any physical, mental or medical impairment or disability that would limit your Job performance in any area of work in the garden center? \_\_\_\_\_

Do you have a valid Colorado Driver's License? \_\_\_\_\_ Are you 18 years of age or older? \_\_\_\_\_ Are you a graduate of high School? \_\_\_\_\_ Are you a U.S. Citizen? \_\_\_\_\_ If not, do you have a legal work visa? \_\_\_\_\_ Are you able to lift 40lbs on a consistent basis? \_\_\_\_\_

### Agreement

I hereby certify that my responses in this application are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. In the event of my employment, I understand that false or misleading information given by me in any form may result in discharge. I understand, also that I am required to abide by all rules and regulations of the company.

I understand and agree that, If I am hired, my employment is for no definite period and may, regardless of the date of payment of my wages and/or salary, be terminated at any time without prior notice.

APPLICANTS SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

### PREVIOUS JOB REFERENCES

Company: \_\_\_\_\_ Contact Name and Phone: \_\_\_\_\_

Company: \_\_\_\_\_ Contact Name and Phone: \_\_\_\_\_

Company: \_\_\_\_\_ Contact Name and Phone: \_\_\_\_\_

Company: \_\_\_\_\_ Contact Name and Phone: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_