



EMPLOYMENT APPLICATION

Thank you for your interest in employment with BAM Outdoor. BAM Outdoor provides equal opportunities to all applicants without regard to race, color, religion, national origin, age, uniformed service or legally protected status. Your employment application will be considered active for 12 months. The completion of this application does not automatically result in an interview or job offer.

PLEASE PRINT CLEARLY

What led you to apply at BAM Outdoor?

Walk In Advertisement If so, name of newspaper _____
 Referral If so, from whom? _____ Yellow Pages/Call In

Date: _____ Date available to begin working: _____

Position/Division Desired: _____

Status Preferred: Full Time Part Time Seasonal/Temporary

Salary/Hourly wage desired? _____

Name: _____ SS#: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone number(s) where you can be reached:

Home: _____ Cellular: _____ Best time to call: _____

Please indicate those areas in which you have experience:

Landscape Office/Computer Hardscape/Pavers
 Mowing Chemical applicator Maintenance
 Tree Crew Snow removal Equipment Operator
 Retail Garden Center Sales Foreman/crew leader Management

PERSONAL INFORMATION

Can you, after employment offer, submit verification of your legal right to work in the United States?

YES NO

Have you ever been convicted of a felony or misdemeanor (other than minor traffic violation)?

YES NO If YES, please explain: _____

Do you have a valid Drivers License? YES NO

Do you have reliable transportation OR reliable means to get to work? YES NO

EDUCATION & TRAINING _____

School	School Name & City	Did you graduate?	Degree Earned	Area of study
High School				
College				
Vocational				

Subjects of special study or special training skills or certifications: _____

FORMER EMPLOYERS _____

List former employers below, starting with the last one first

Month and year	Name & Phone number	Supervisor May we contact this person?	Salary	Position	Reason for leaving & amount of notice given upon leaving
From: _____ To: _____					
From: _____ To: _____					
From: _____ To: _____					
From: _____ To: _____					

Have you ever been terminated or asked to resign from any position? If yes, please explain: _____

PROFESSIONAL REFERENCES _____

(Do not list relatives as professional references)

Name	Phone Number	Business & Years Known



Application for Employment: Driving History

Please list all prior experience operating a commercial motor vehicle.

Please list all motor vehicle accidents (within the last 3 years), including the date and nature of each accident and any personal injuries or deaths involved.

Please give a detailed statement pertinent to previous denial, revocation or suspension of a license or permit- or a statement indicating that the driver has never had a license or permit denied, revoked or suspended.

This certifies that I have personally completed this application and that all entries and information stated herein are true and complete to the best of my knowledge.

Applicant's Signature

Date

**** Note: BAM OUTDOOR is required by the Indiana Department of Transportation to perform a background check of your driving record.**