

Garden Crossings L.L.C.

4902 96th Ave Zeeland, MI 49464

Employment Application

Applicant Information					
Full Name:			Date:		
Address:	Last	First	M.I.		
	Street Address		Apartment/Unit #		
D .	City	- "	State ZIP Code		
Phone: E-mail Address:					
Date Availab	le: Social	Desired Wage: \$			
Position Applied for:					
Are you a cit	izen of the United States?	YES NO If no, are you a YES NO	uthorized to work in the U.S.?		
Have you ev	er been convicted of a felony?				
If yes, explain:					
Education					
High School:					
_	To:	YES NO Did you graduate?	Degree:		
College:		Address:			
From:	To:	Did you graduate? YES NO	Degree:		
Other:		Address:			
From:	To:	Did you graduate? YES NO	Degree:		
References					
Please list th	nree professional references.				
Full Name:		Relationship:			
Company:			Phone:		
Address:					
Full Name:		Relationship:			
Company:			Phone:		
Address:					
Full Name:					
Company:			Phone:		
Address:					

Previous Employment					
Company:	Phone:				
Address:	Supervisor:				
Job Title: Starting Wage: \$	Ending Wage: \$				
Responsibilities:					
From: To: Reason for Leaving:					
May we contact your previous supervisor for a reference?					
Company:	Phone:				
Address:	Supervisor:				
Job Title: Starting Wage: \$	Ending Wage: \$				
Responsibilities:					
From: To: Reason for Leaving:					
May we contact your previous supervisor for a reference?					
Company:	Phone:				
Address:	Supervisor:				
Job Title: Starting Salary: \$	Ending Salary: \$				
Responsibilities:					
From: To: Reason for Leaving:					
May we contact your previous supervisor for a reference?					
Military Service					
Branch:	_ From: To:				
Rank at Discharge: Type of Discharge:					
If other than honorable, explain:					
Disclaimer and Signature					
I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal. This company is hereby authorized to make any investigations of my prior educational and employment history. I understand that employment at this company is "at will," which means that either I or this company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment will continue on that basis. I understand that no supervisor, manager, or executive of this company, other than the president has the authority to alter the foregoing. Signature:					