

Kittleson Landscape Inc.  
10486 County Road ID  
Blue Mounds, WI 53517  
608-437-8845 office 608-437-4422 fax

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Position Desired \_\_\_\_\_ Date \_\_\_\_\_  
Name \_\_\_\_\_ Social Security# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
Last MI  
Home Telephone# \_\_\_\_\_ Alternate Phone# \_\_\_\_\_  
Present Address \_\_\_\_\_  
Street City State Zip  
Drivers License # \_\_\_\_\_ CDL Yes  No

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Are you legally eligible for employment in the USA? Yes  No   
If you are not a U.S. citizen, what is your visa status?

\_\_\_\_\_   
If under 18 years of age, state birth date \_\_\_\_\_

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Date available for employment \_\_\_\_\_ Salary Desired \_\_\_\_\_

Employment Preference:  Full Time  Part Time  Seasonal

Can you work evenings?  Yes  No Can you work weekend hours?  Yes  No

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Have you ever been employed by Kittleson Landscape Inc.  Yes  No

Have you ever been convicted of a felony? \*  Yes  No

If yes the Date \_\_\_\_\_

Nature of Conviction \_\_\_\_\_

\*Will be considered only as if relates to the job and will be automatic bar to employment.

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Please read carefully before signing.  
All qualified applicants will receive consideration for employment without regard to sex, race, color,

National origin or ancestry, age, handicap, marital status, source of income, class, physical characteristics, sexual orientation, or political beliefs, as required by federal, state or local laws. No information on this application will be used for the purpose of discrimination on the basis of any such protected category.

I understand that receipt of this application does not guarantee to job interview or offer employment. I understand that misrepresentation or omission of facts shall be sufficient cause for removal from consideration for employment or for dismissal after employment. I authorize Human Resources Department of Kittleson Landscape Inc. to investigate, without liability, all statements contained in this application and hereby release such person, corporation, or other organization from any and all liability for providing such information. I also authorize listed employers and reference without liability to make full response to any inquires by the Human Resources Department of this institution in connection with my application for employment. I understand that no company manager or representative other than CEO Has any Authority to enter into any contractual agreement, which must be in writing, for employment for any specific time period or to make any agreement contrary to the foregoing.

Your application will be kept on active file for six months. You must contact the Human Resources Department if you wish to have your application considered for any specific opening that occurs within that period. After six months, you must submit a new application for any position for which you wish to be considered.

Applications Signature \_\_\_\_\_ Date \_\_\_\_\_

For Human Resources use only.

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Education

Name and Location	Dates Attended	Major Studies	Did you Graduate?	Degree
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High School				
Business/Trade school				
College				
Graduate Studies				
Others (specific)				

Are you currently pursuing further studies?     Yes     No

If so, what courses and

When \_\_\_\_\_

Machine Operation:

References

Please list names, occupations, addresses, and phone numbers of two professional references. (Students please include academic/clinical reference) Indicate relationship to listed reference.

Name \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Phone Number \_\_\_\_\_

Relationship \_\_\_\_\_

Relationship \_\_\_\_\_

Employment History: Please list below (even if listed on resume) present and past employment beginning with the most recent position. Complete all items and be specific.

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Company \_\_\_\_\_ Address \_\_\_\_\_ Telephone # \_\_\_\_\_

Dates Employed \_\_\_\_\_ Salary Starting \_\_\_\_\_ Ending \_\_\_\_\_

Your Title \_\_\_\_\_

Your Duties (List all Promotions and include a brief description of each)

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Reason for Leaving?

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Company \_\_\_\_\_ Address \_\_\_\_\_ Telephone # \_\_\_\_\_

Dates Employed \_\_\_\_\_ Salary Starting \_\_\_\_\_ Ending \_\_\_\_\_

Your Title \_\_\_\_\_

Your Duties (List all Promotions and include a brief description of each)

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Reason for Leaving?

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Company \_\_\_\_\_ Address \_\_\_\_\_ Telephone # \_\_\_\_\_

Dates Employed \_\_\_\_\_ Salary Starting \_\_\_\_\_ Ending \_\_\_\_\_

Your Title \_\_\_\_\_

Your Duties (List all Promotions and include a brief description of each)

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Reason for Leaving?

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May we contact your employers? Yes  No