



**The Growing Place**  
nursery & flower farm, inc.

**Naperville...** 630.355.4000  
25w471 Plank Road, IL 60563  
**Aurora...** 630.820.8088  
2000 Montgomery Road, IL 60504  
thegrowingplace.com |

## Application for Seasonal Employment

Pre-Employment Questionnaire Equal Opportunity Employer

### Personal Information:

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
*Last First MI Today's Date*

\_\_\_\_\_  
*Street Address City, State Zip Code*

\_\_\_\_\_  
*Home Phone Cell Phone*

\_\_\_\_\_  
*Email Address*

**Position Applying For:** \_\_\_\_\_

Have you applied to The Growing Place before? Yes \_\_\_\_\_ No \_\_\_\_\_ If so, when? \_\_\_\_\_

**Availability** – We are open 7 days a week! How many hours a week are you available? \_\_\_\_\_

What days of the week are you available to work? \_\_\_\_\_

What hours of the day are you available to work? \_\_\_\_\_

Are you employed now? Yes \_\_\_\_\_ No \_\_\_\_\_ May we contact your present employer? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you legally authorized to work in the U.S.? Yes \_\_\_\_\_ No \_\_\_\_\_

When can you start? \_\_\_\_\_ Hourly rate desired: \_\_\_\_\_

Why have you chosen to apply at The Growing Place? Why do you feel you will be a good fit?

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

If driving is a requirement of your job, you will need a valid driver's license and a clean driving record.

Additional testing of job-related skills may be required prior to employment.

### Education

	High School	College	Graduate/Professional/Trade
Years Completed	9 10 11 12	1 2 3 4	
Diploma/Degree			
Course of Study?			
List any specialized training, apprenticeship or skills			

**Employment History**

Dates: To/From	Employer, Address, Phone	Job/Position	Salary/Hourly Rate	Reason for Leaving

**References**

Name	Phone	Company/Position	Years Known

Please include any additional information you feel maybe helpful to us in considering your application.

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I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed; falsified statements on this application shall be grounds for dismissal.

**DO NOT WRITE BELOW THIS LINE – OFFICE USE ONLY**

Date \_\_\_\_\_ Interviewed by \_\_\_\_\_

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

*Remarks*


I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

Hire Date	Dept.	Position	Start Date	Rate

This waiver does not permit the releases or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws.

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

Hired by \_\_\_\_\_ Date \_\_\_\_\_