

# APPLICATION FOR EMPLOYMENT 15210 Wayzata Boulevard, Wayzata, MN 55391

Park Avenue of Wayzata, Inc. is an Equal Opportunity Employer. We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or any other status protected by law or regulation. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.

Answer each question fully and accurately. PLEASE PRINT. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information.

Current Street Address  Cell Phone  Email address  Are you 18 years of age or older?   \[ \textsquare Years	City State Zip Code Home Phone  Yes  No Sle to work in the United States?  Yes  No				
Current Street Address  Cell Phone  Email address  Are you 18 years of age or older?	City State Zip Code  Home Phone  Yes  No  No  Yes  No				
Cell Phone  Email address  Are you 18 years of age or older?	Home Phone				
Email addressAre you 18 years of age or older?	res □No ole to work in the United States? □Yes □No				
Are you 18 years of age or older? ☐Ye	res □No le to work in the United States? □Yes □No				
If hired, can you furnish proof you are eligible	ole to work in the United States?				
Are you willing to undergo a criminal backgro	round check? Tyes Tho If no. please explain.				
EMPLOYMENT DESIRED					
Type of Employment you are seeking: $\Box$ Fu	ull-time   Part-time   Temporary				
When could you start work? Wage expectation?					
Have you ever applied here before? $\Box$ Ye	es   No If yes, when?				
Have you ever worked here before? $\Box$ Ye	res   No If yes, when?				
For Jobs that Require Driving: Do you have a	a valid driver's license? □Yes □No				
Driver's License number	State				
Have you had your driver's license suspended	ed or revoked in the last 3 years? $\Box$ Yes $\Box$ No If yes, give details:				



	EI	DUCATION					
	High School	Technical College	College	Graduate School			
School Name/Location							
Years Completed (Circle One)	1 2 3 4	1 2	1 2 3 4	1 2 3 4			
Did you graduate?	□Yes □No	□Yes □No	□Yes □No	□Yes □No			
Diploma/Degree or Certificate							
MISCELLANEOUS							
All candidates who are offered employment with Park Avenue of Wayzata, Inc. are subject to criminal background checks and may be prohibited from employment based on the violations, if any, that are discovered. Additionally, final candidates for Property Managers, Resident Managers, Leasing Agents, Maintenance Technicians, Caretakers and other positions, as deemed necessary, working in Minnesota are required to pass a Kari Koskinen background check, pursuant to Statute 299C.67 to 299C.71.  Has your employment with any employer ever been involuntarily terminated?   Yes  No  If yes, please identify the employer, date of termination and reason for termination:							
	REF	ERENCES					
Please list three professional reference	es.	DELATION 115					
FULL NAME		RELATIONSHIP					
COMPANY		CONTACT NUMBER					
FULL NAME RELATIONSHIP							
COMPANY		CONTACT NUMBER					
CONFANT		CONTACT NUIVIBER					
FULL NAME		RELATIONSHIP					
COMPANY		CONTACT NUMBER	CONTACT NUMBER				



## **EMPLOYMENT HISTORY** List names of employers in consecutive order with present or last employer listed first. Note: A job offer may be contingent upon acceptable references from current and former employers. NAME OF EMPLOYER JOB TITLE AND DUTIES ADDRESS CITY, STATE, ZIP DATES EMPLOYED (MO/YR) FROM: TO: SUPERVISOR PHONE REASON FOR LEAVING NAME OF EMPLOYER JOB TITLE AND DUTIES **ADDRESS** CITY, STATE, ZIP DATES EMPLOYED (MO/YR) FROM: TO: REASON FOR LEAVING PHONE SUPERVISOR NAME OF EMPLOYER JOB TITLE AND DUTIES **ADDRESS** CITY, STATE, ZIP DATES EMPLOYED (MO/YR) FROM: TO: SUPERVISOR PHONE REASON FOR LEAVING NAME OF EMPLOYER JOB TITLE AND DUTIES ADDRESS CITY, STATE, ZIP DATES EMPLOYED (MO/YR) FROM: TO: SUPERVISOR PHONE REASON FOR LEAVING



#### **DISCLAIMER AND SIGNATURE**

APPLICANT: Please read the following carefully before signing this application.

- I certify that the information given by me is true in all respects.
- I understand that the misrepresentation or omission of facts on this application, on my resume or during any stage of the hiring process will eliminate me from further consideration or, if discovered after hire, may result in the termination of my employment.
- I understand that the information contained in this employment application or my being invited to participate in any stage of the hiring process is NOT intended to create an employment contract between this Company and myself. If an employment relationship is established, I understand that I have the right to terminate my employment at any time, for any reason or for no reason, with or without notice, and this Company has the right to terminate my employment at any time, for any reason or for no reason, with or without notice. This Company's policies and procedures, including employment-at-will, cannot be modified in any way without the express written intent to do so by the President of this organization.
- I understand that an offer of employment is contingent on my providing sufficient documentation necessary to establish my identity and eligibility to work in the United States.
- I authorize this Company and its representatives to contact my prior employers, former supervisors and company personnel, schools and all others for the purpose of verifying that the information I have supplied during the selection process and for obtaining job-related information regarding my knowledge, skills, abilities, performance of duties and compliance with policies. I authorize my prior employers to provide this Company any job-related information, personal or otherwise, they may have regarding me and I release this Company and them from any liability resulting from the release of this information. I further authorize all employers, schools and other persons to provide any information or transcripts that may be requested by this Company which will be used to determine if I am qualified to perform the job duties for which I am applying.

By signing below, I acknowledge that I have read, understand and agree with the above statements.						
Signature of Applicant	Date					



### **SUMMER GROUNDS MAINTENANCE QUESTIONNAIRE**

### List any previous landscape or nursery work experience:

Comp	any:		
Comp	any:		
Have	you h	ad any experience with the follo	wing:
Yes	No		Explain
		Tree/Shrub planting	
		Tree/Shrub pruning	
		Operating chain saw	
		Operating power equipment	
		Small engine repair	
		Painting	
		Carpentry	
		Construction of rock or tie walls	
		Other	

Signature