



# CW Snow Plowing and Landscaping

Cheektowaga NY

7164000567

[cwsnowplowingllc@gmail.com](mailto:cwsnowplowingllc@gmail.com)

## EMPLOYMENT/JOB APPLICATION

### PERSONAL INFORMATION

FULL NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

SOCIAL SECURITY NUMBER(SSN): \_\_\_\_ - \_\_\_\_ - \_\_\_\_

DATE AVAILABLE: \_\_\_\_\_

DESIRED PAY; \$ \_\_\_\_\_  HOUR  SALARY

POSITION APPLIED FOR: \_\_\_\_\_

EMPLOYMENT DESIRED  FULL-TIME  PART-TIME

### EMPLOYMENT ELIGIBILITY

ARE YOU ALLOWED TO WORK IN THE U.S.?  YES  NO

HAVE YOU EVER WORKED FOR THIS EMPLOYER?  YES\*  NO

\*IF YES, WRITE THE START AND END DATES: \_\_\_\_\_

VALID NEW YORK STATE DRIVER'S LICENSE  YES  NO

\*IF YES, PLEASE PROVIDE THE DL# \_\_\_\_\_

# EDUCATION

HIGH SCHOOL: \_\_\_\_\_ CITY/STATE: \_\_\_\_\_

FROM: \_\_\_\_\_ TO: \_\_\_\_\_

GRADUATE?  YES  NO

DIPLOMA: \_\_\_\_\_

COLLEGE: \_\_\_\_\_

FROM: \_\_\_\_\_ TO: \_\_\_\_\_

GRADUATE?  YES  NO

DEGREE: \_\_\_\_\_

# EMPLOYMENT HISTORY

EMPLOYER #1: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

JOB TITLE: \_\_\_\_\_

STARTING DATE: \_\_\_\_\_ ENDING DATE: \_\_\_\_\_

REASON FOR LEAVING: \_\_\_\_\_

EMPLOYER #2: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

JOB TITLE: \_\_\_\_\_

STARTING DATE: \_\_\_\_\_ ENDING DATE: \_\_\_\_\_

REASON FOR LEAVING: \_\_\_\_\_

EMPLOYER #3: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

JOB TITLE: \_\_\_\_\_

STARTING DATE: \_\_\_\_\_ ENDING DATE: \_\_\_\_\_

REASON FOR LEAVING: \_\_\_\_\_

# MILITARY SERVICE

ARE YOU A VETERAN?  YES  NO

BRANCH: \_\_\_\_\_ RANK AT DISCHARGE: \_\_\_\_\_

STARTING DATE: \_\_\_\_\_ ENDING DATE: \_\_\_\_\_

TYPE OF DISCHARGE: \_\_\_\_\_

IF NOT HONORABLE, PLEASE EXPLAIN: \_\_\_\_\_

# BACKGROUND CHECK CONSENT

IF ASKED, ARE YOU WILLING TO CONSENT TO A BACKGROUND CHECK?  YES  NO

# DISCLAIMER

Applicant understands that this is an Equal Opportunity Employer and committed to excellence through diversity. In order to ensure this application is acceptable, please print or type with the application being fully completed in order for it to be considered.

I, the Applicant, certify that my answers are true and honest to the best of my knowledge. If this application leads to my eventual employment, I understand that any false or misleading information in my application or interview may result in my employment being terminated.

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**PRINT NAME** \_\_\_\_\_