



Greenleaf Services, Inc.

Application for Employment

Submit employment application to: Info@GreenleafServicesInc.net

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Date Available	Social Security No.	Desired Salary	
Position Applied for			
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain

EDUCATION			
High School		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

REFERENCES	
<i>Please list three professional references.</i>	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

PREVIOUS EMPLOYMENT			
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? YES <input type="checkbox"/> NO <input type="checkbox"/>			
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? YES <input type="checkbox"/> NO <input type="checkbox"/>			
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? YES <input type="checkbox"/> NO <input type="checkbox"/>			

MILITARY SERVICE	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

DISCLAIMER AND SIGNATURE	
<p>The answers I have given are true to the best of my knowledge. I authorize Greenleaf Services Inc. to investigate the statements I have made and perform all necessary background investigations required for employment. I understand that this company is an "Employment At Will" employer and that I may terminate my employment at any time for any reason and that Greenleaf Services, Inc. may also terminate my employment at any time for any reason. I understand that Greenleaf Services Inc. has a stringent substance abuse policy and that I will be required to undergo a pre-employment drug screen prior to obtaining employment. Once employed with Greenleaf Services, Inc. I agree to participate in substance abuse training and drug / alcohol screening. Greenleaf Services Inc. is an equal opportunity employer. Applications and employment decisions are made without regard to race, color, religion, sex, national origin, marital status, veterans' status, disability or any other legally protected status. E-Verify social security number verification required.</p>	
Signature	Date

Return To: **Greenleaf Services, Inc.**
 20393 John J Williams Hwy
 Lewes, Delaware 19958
 Phone 302-645-1231 Fax 302-645-1252
 Info@GreenleafServicesInc.net