

Personal Data			Today's Date	
NAME Last	First	Middle	Preferred Nickname	
Date of Birth (for pre'employment background check)		Social Security Number		
Main Phone Number		Alternate Phone Number		E-Mail
CURRENT ADDRESS Street		City	State	Zip Code
PRIOR ADDRESS if less than 2 yeas at Current Address		City	State	Zip Code
Are you legally eligible for employment in the country? (Proof of Authorization to work in the US is required)			Referred By	
Have you been convicted of a felony within the last 5 years?			City, State, or Country of Birth	

Employment Desired

Position	Date you can start?	Desired salary?
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Skills & Qualifications

Are you Bilingual?	If so, list languages.
Computer Proficiency	Are you able to work in extreme temperatures?
Are you able to bend, twist and walk rapidly for extended lengths of time?	Are you able to lift 50 pounds or more?
Are you able to arrive at the designated work site daily and on time?	Do you have steel toe boots?
Describe your landscaping experience. (ie: irrigation,maintenance, pruning, planting, retaining wall, etc.)	
Type of Equipment Operated	Years of Equipment Experience

Education History

	School	City, State Country	Years Attended	Did you graduate?	Course of Study Degree
High School					
College					
Other					
Other					

Driving Qualification

Do you have reliable transportation to and from work?		Do you have a valid driver's license?	
License # (if required for position)		State	Exp. Date
Do you have a Commercial Driver's License?		If yes, what type?	

Employment History

Start	End
Employer	Phone
Summarize nature of work performed	
Reason for leaving	May we contact this employer for reference?

Start	End
Employer	Phone
Summarize nature of work performed	
Reason for leaving	May we contact this employer for reference?

Start	End
Employer	Phone
Summarize nature of work performed	
Reason for leaving	May we contact this employer for reference?

References

Full Name	Company	Position Relationship	Phone
Full Name	Company	Position Relationship	Phone
Full Name	Company	Position Relationship	Phone

Application Form Waiver

I hereby authorize LMP, Inc. (“the Company”) to thoroughly investigate my references, work record, education, and other matters related to my suitability for employment and, further, I authorize the references I have listed to disclose to the Company all data, reports, and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and other persons, corporations, partnerships, and associations from any and all claims, demands, or liabilities arising out of or in any way related to such investigation or disclosure.

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment may result in rejection of this application or in immediate discharge if I am employed, regardless of the time elapsed before discovery.

I understand that nothing contained in this application, or conveyed during any interview which may be granted, or during my employment, if hired, is intended to create an employment contract between the Company and me. In addition, I understand and agree that if I am employed, my employment is at-will and is for no definite or determinable period and may be terminated at any time, with or without prior notice, and with or without cause, at the option of either myself or the Company, and that no promises or representations contrary to the foregoing are binding on the Company unless made in writing and signed by me and the Company’s designated representative.

I understand that in connection with my application for employment, the Company may obtain a consumer report and/or investigate consumer reports about me that may contain information as to my character, general reputation, personal characteristics, and mode of living. Such reports may include or consist of my driving history, criminal history, or credit history. I further understand that any job offer extended by the Company is contingent upon receipt of a favorable consumer or investigative consumer report about me.

I understand that in connection with my application for employment, depending upon the position for which I have applied, any offer of employment is conditioned upon my taking and passing a post-offer/pre-employment drug test, and if required for the position for which I have applied, a post-offer/pre-employment medical examination. I understand that I may refuse to take any required pre-employment drug test and/or medical examination, but that if I do, any offer of employment will be immediately withdrawn.

Signature Disclaimer

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

This application, when completed and signed, becomes the property of LMP, IncSM.

Signature of Applicant	Print Name	Date

Landscape Maintenance Professionals, Inc. is an Equal Employment Opportunity and E-Verify Employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this company depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.

Please return to:

Landscape Maintenance Professionals, Inc., 13050 E US Highway 92, Dover FL 33527
 Phone: 813.757.6500 Email: info@lmppro.com