

Application for Employment
IMUA LANDSCAPING CO., INC.
96-1272 Waihona St. #12, Pearl City, HI 96782 - 808-456-1930



Date: _____

PERSONAL DATA:

Name: _____ Date of Birth: _____
(Last) (First) (Middle)

Address: _____
(No., Street, City, State, Zip Code)

Telephone: (____) _____ Social Security No.: _____

Sex: M ___ F ___ Height: _____ Weight _____ Marital Status: _____ No. of Dependents: _____

Health: _____ Drivers License No. & State: _____ Expires: _____

Are you currently employed? _____ Where & Phone No: _____

What position are you applying for? _____

Salary desired: _____ Are you willing to work overtime/weekends? _____

Are you a Veteran? ___ Yes ___ No

HEALTH DATA:

Have you ever filed a Workman's Compensation Claim? _____ For what reason: _____

Are you currently taking medication? _____ What: _____

For what reason? _____

Have you ever had any of the following, if so, please describe:

Epilepsy _____ Back Problems _____ Heart Problems _____ Bone/Joint Problems _____
Allergies _____ Asthma _____ Sinus Problems _____ Sight (Glasses) _____

Hearing Impairment _____ Any other Physical Limitations: _____

EDUCATION: Name & Location: Years Attended: Course of Study: Degree:

Elementary: _____

High School: _____

College: _____

WORK EXPERIENCE:

(List present employer first, then next previous)

Company: _____ From: _____ To: _____

Address: _____

Supervisor: _____ Telephone No.: _____

Your Title/Description: _____ Starting Salary: _____ Ending: _____

Reason for leaving: _____

Company: _____ From: _____ To: _____

Address: _____

Supervisor: _____ Telephone No.: _____

Your Title/Description: _____ Starting Salary: _____ Ending: _____

Reason for leaving: _____

Company: _____ From: _____ To: _____

Address: _____

Supervisor: _____ Telephone No.: _____

Your Title/Description: _____ Starting Salary: _____ Ending: _____

Reason for leaving: _____

REFERENCES: Professional and personal (Not relatives/previous employers)

Name: _____ Address & Phone No.: _____ Years known: _____

1. _____

2. _____

3. _____

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal.

Signature _____ **Date** _____