



Please read the following BEFORE completing your application.

HOW TO APPLY:

- **COMPLETE** a Garten Services application form or submit a Resume.
- **DO NOT** state “See Resume” on the application form; we need the form completed.
- **If your application is not complete (including checking “yes”/”no” boxes), you will not be considered for interview.**

A resume may be submitted; however, if you are selected for interview, you will be required to complete an application at that time.

All applications completed and submitted via email or through our website will require a signature at time of interview.

NOTE: Applications will be reviewed following the closing date. If no closing date is listed, applications will be reviewed when an adequate number have been received. Interviews will be scheduled after applications are reviewed.

Not all applicants will be selected for interview.

EMPLOYMENT AT GARTEN SERVICES IS CONTINGENT UPON REFERENCE CHECKING, PASSING A PRE-EMPLOYMENT DRUG TEST, AND PASSING STATE AND FEDERAL CRIMINAL HISTORY FINGERPRINT BACKGROUND CHECKS.

SOME POSITIONS REQUIRE A VALID OREGON DRIVERS LICENSE, AN ACCEPTABLE DRIVING RECORD, AND PROOF OF CURRENT VEHICLE INSURANCE. A DMV CHECK WILL BE CONDUCTED TO VERIFY YOUR DRIVING RECORD. IF YOU ARE HIRED AND HAVE AN OUT OF STATE LICENSE, YOU WILL BE REQUIRED TO OBTAIN AN OREGON DRIVERS LICENSE WITHIN 30 DAYS.

EMPLOYMENT APPLICATION



SERVICES, INC. WORK WITH US

3334 Industrial Way NE PO Box 7310 Salem OR 97303-0088
 Telephone (503) 581-4472 Fax (503) 566-3434 www.garten.org

Position Applied for: _____

We Are a Drug Free Workplace.

Date: _____

Garten Services is an equal opportunity employer and does not discriminate on the basis of race, color, religion, national origin, sex, age, sexual orientation, gender identity or expression, marital status, political affiliation or belief, veteran status, or physical or mental disability or association with any of these protected classes.

Personal Information			
Last Name	First	Middle	
Street Address	City	State	Zip
Phone Number	Message Phone		
Do you have relatives working for this organization? <input type="checkbox"/> Yes, Who: _____ <input type="checkbox"/> No		Email Address	
Check the following options which you would consider: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary		Do you have the legal right to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you employed now? <input type="checkbox"/> Yes, Date available _____ <input type="checkbox"/> No		Wage expected:	

Education and Training					
High School	Did you Graduate or receive your GED ? Y / N				
	Name and Location of School	Course of Study	Number or Years Completed	Did you Graduate	Diploma or Degree
Trade or Business School				Y / N	
College or University				Y / N	
Graduate School				Y / N	

Special Skills, Qualifications and Considerations:

You may be required to drive as a part of your employment. Do you have a valid Driver's License? Yes No

Driver's License # : _____ State: _____ CDL : Yes No

List special skills and qualifications, volunteer activities, military experience, employment or other activities which may relate to the job for which you are applying: _____

List any other Certificates / Licenses that you have which relate to this job: _____

List any machine or equipment that you are qualified and experienced at operating which may relate to this job: _____

WORK RECORD - BEGIN WITH MOST RECENT JOB AND COVER ALL PERIODS OF TIME INCLUDING UNEMPLOYMENT

1 Employer _____ Employed from _____ to _____
 Address _____
 Street City State/Zip Phone
 Kind of Business _____ Job Title _____
 Immediate Supervisor _____ Pay Rate - Beginning: _____ Ending: _____
 Job Duties _____
 What did you like about this job? _____
 Reasons for Leaving? _____
 May we contact? Yes No, explain: _____

2 Employer _____ Employed from _____ to _____
 Address _____
 Street City State/Zip Phone
 Kind of Business _____ Job Title _____
 Immediate Supervisor _____ Pay Rate - Beginning: _____ Ending: _____
 Job Duties _____
 What did you like about this job? _____
 Reasons for Leaving? _____
 May we contact? Yes No, explain: _____

3 Employer _____ Employed from _____ to _____
 Address _____
 Street City State/Zip Phone
 Kind of Business _____ Job Title _____
 Immediate Supervisor _____ Pay Rate - Beginning: _____ Ending: _____
 Job Duties _____
 What did you like about this job? _____
 Reasons for Leaving? _____
 May we contact? Yes No, explain: _____

4 Employer _____ Employed from _____ to _____
 Address _____
 Street City State/Zip Phone
 Kind of Business _____ Job Title _____
 Immediate Supervisor _____ Pay Rate - Beginning: _____ Ending: _____
 Job Duties _____
 What did you like about this job? _____
 Reasons for Leaving? _____
 May we contact? Yes No, explain: _____

References: List three (3) people not related to you who know your work history.

	Name	Occupation / Relationship	Years Known	Telephone
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

The following information is requested only to help match your skills with positions which may be available and to provide reasonable accommodation where appropriate.

Are you able to perform the primary duties of the job applied for (as outlined in the newspaper ad/posting notice/job description, etc.) with or without an accommodation? **Yes** **No**

Some jobs at this company may not be held by persons convicted of certain crimes. The mere existence of a criminal record is not an automatic bar to employment with this company.

Have you ever been convicted of a felony and/or misdemeanor? **Yes** **No** If so, please describe:

Please read the following statements carefully before signing this application. Only those applications that are signed and dated are considered valid. If you have any questions regarding this statement, please ask them before signing.

- I certify that all answers and statements I have made on this application (and resume or other supplementary materials) are true and complete without omissions. I understand that any false information will be grounds for refusal to hire or for immediate discharge if I am employed. I authorize any of the persons or organizations having personal knowledge about me to give you any and all information and records regarding my employment, education, character and qualifications. I release from liability and hold harmless all persons and organizations supplying this information to Garten Services and/or its agents. **Yes** **No**
- I understand that Garten Services is a Drug Free Workplace and that my employment is subject to the satisfactory results of a mandatory chemical screen test and any other pre-employment examination required by Garten. I agree to conform to all rules and regulations of Garten as they presently exist or are later modified. **Yes** **No**
- I understand that my employment at Garten Services is offered "at will" and is of indefinite duration and that my employment can be terminated, at the discretion of Garten Services or at my option, without notice, at any time. **Yes** **No**
- I understand that no representative of Garten Services has any authority to enter into any employment agreement for any specified period of time, or to assure me of any future position, benefits, or terms and conditions of employment. No agreement to the contrary will be recognized by Garten unless such agreement is in writing and signed by the Executive Director. **Yes** **No**
- I understand that interviews are given on a competitive basis, using job-related factors after a written application has been received and reviewed. Because of the large number of applications received, not everyone who applies for a vacant position will be interviewed. **Yes** **No**

I have read, understand and agree with the above.

Signature of Applicant

Date

This application is valid for only sixty (60) days from the date I signed. If I want to be considered for job openings more than sixty (60) days from date signed, I will submit a new application.



WORK WITH US

EEO Information Sheet

Garten Services, Inc. is an equal opportunity employer. It is the policy of Garten Services, Inc. to actively recruit and hire qualified applicants, regardless of race, color, religion, national origin, sex, age, sexual orientation, gender identity or expression, marital status, political affiliation or belief, veteran status, or physical or mental disability or association with any of these protected classes in accordance with applicable law. To monitor our progress in meeting equal opportunity goals, the following information is requested from all applicants. It will be held confidential and will be kept separate from the application for employment. Refusal to provide this information will not subject you to any adverse treatment. The information you provide will be used solely for research and statistical purposes as required for equal opportunity reporting and will in no way affect any employment decision. Your voluntary cooperation is appreciated.

Position Applying For: _____ Date: _____

Last Name First Name Middle Initial

____ Male _____ Female Date of Birth: _____

Ethnic ID:

____ Hispanic or Latino

Not Hispanic or Latino:

- ____ White
- ____ Black or African American
- ____ Native Hawaiian or Other Pacific Islander
- ____ Asian
- ____ American Indian or Alaska Native
- ____ Two or more races

Referral Source:

- ____ Local Newspaper
- ____ Minority Publication
- ____ Professional Association
- ____ Job Fair
- ____ Public or Private Agency
- ____ Garten Website
- ____ Other Website: _____
- ____ Other Referral: _____
- ____ Out of Town Newspaper
- ____ Employment Agency
- ____ Local Employment Office
- ____ Walk-in
- ____ Employee Referral
- ____ Employee Name: _____