

Health History

Date of last Physical _____

Do you enjoy smoking ? _____

Do you have any conditions that could affect the safety of yourself or others while working ?

(if yes please explain)

Presently on any medication or drugs that could affect the safety of yourself or others while working?

(if yes please describe _____)

Do you have a valid drivers license? Y / N class _____

Have you any driving convictions or restrictions? _____

Have you ever been convicted of a crime? Y / N If so, please explain _____

Experience: Please indicate any previous experience with the following: (If yes, rate yourself - 1 = 100 + hours, 2 = less than 100 hours, 3 = less than 10 hours)

	YES	NO	RATING		YES	NO	RATING
backhoe	_____	_____	_____	retail experience	_____	_____	_____
carpentry	_____	_____	_____	small engine repair	_____	_____	_____
clerical	_____	_____	_____	supervisory skills	_____	_____	_____
graphic skills	_____	_____	_____	plant knowledge	_____	_____	_____

Please list any other skills or experiences that you feel would make you a more valued employee:

Please list hobbies and leisure time activities you enjoy:

Five words to describe yourself: _____

To be read and signed by applicant

It is understood and agreed that if I am hired, it may be for a probationary period during which time I may be discharged without recourse. My signature certifies that I have completed this application and that all information is true and complete to the best of my knowledge.

Signature

Date

Employer comments: