



DATE: _____ POSITION APPLIED FOR: _____

Referred by: _____ Date Available for Work: _____

INSTRUCTIONS: Please read carefully. Every item on this form must be answered to the best of your ability. Please print and use a pen. Your qualifications will be carefully reviewed and you will be given thorough consideration for the position(s) for which you have applied. Upon employment, this application will become part of your permanent record at Medek Tree Service, Inc. Keep this in mind as you complete it.

Please turn in a copy of your current driving record with this application.

Special Note: You are not required to supply any information that is prohibited by Federal, State, or Local law. We are an Equal Opportunity Employer. Medek Tree Service, Inc. does not discriminate on the basis of race, color, religion, gender, national origin, pregnancy, marital status, citizenship, age, disability, veteran status, or any other legally protected class. You may request assistance in completing this application.

PERSONAL

Name _____ Telephone Number: () _____

First M.I. Last

Street _____ Box _____ City _____ ST _____ Zip _____

Cell/Digital Phone _____ E-Mail Address _____ @ _____

If younger than 21, state your age here _____ Are you legally entitled to work in the United States? yes no
**Compliance with I-9 requirements is mandatory, upon employment

If convicted of a crime(s), explain here: _____ No convictions (A criminal conviction may or may not prohibit you from employment here)

Do you currently hold a valid Virginia Drivers License? _____ Virginia Drivers License Number: _____
Please submit a current copy of your driving record along with your application.

Have you ever been convicted of a moving traffic violation within the past 7 years? yes no If yes, list all here, including dates & infraction description(s) : _____

Have your driving privileges ever been revoked or suspended? yes no If yes, list here when and why: _____

Do you currently hold a Commercial driving license (CDL)? yes no if so, what license _____

EDUCATION

High School (Name and Address) _____

Did you graduate? _____ If no, last grade completed _____ G.E.D. Obtained? _____ Grade Average _____

Colleges (Name and Address) _____

Please initial here to certify that your college degree was earned through the actual completion of college level course work and conferred by an accredited college or university. _____

Colleges (Name and Address) _____

Did you graduate? _____ If no, number of hours completed _____ Grade Point Average _____ Degree _____

Major _____ Minor _____ If attending, date of graduation _____

Other Education _____

License(s), including the state of issue and the number: _____

MILITARY not applicable

List service in U.S. Military: From _____ to _____ Branch _____

Rank at Discharge _____ Military experience that may be applicable to working here _____

GENERAL EMPLOYMENT INFORMATION

1. List here all of the equipment with which you have experience and training. (Examples: chain saws, ropes, pulleys, etc.):

2. If you are applying for a field position, please indicate by circling those activities in which you have experience and training.

Climb Trees	Yes	No	Use a chain saw	Yes	No
Drag Brush	Yes	No	Lift brush and feed into a brush chipper	Yes	No
Able to lift up to 50lbs	Yes	No	Work Outdoors in all Seasons	Yes	No
Rigging	Yes	No	Throw Ropes	Yes	No
Drive a vehicle	Yes	No	Drive a straight shift	Yes	No
Back up a trailer	Yes	No	VDOT Flagging	Yes	No

Please explain any "No" answers _____

Climber: (if applying for this position please fill out)

How many years experience do you have? _____

A. Do you own your own climbing gear? _____

B. Do you have any bucket experience? _____ If so how many years? _____

C. Competent in free climbing (climbing without spikes)? _____ If so how many years? _____

3. Salary Expected _____ hour _____ or week Number of hours you are available per week? _____ No preference

4. Type of work sought: regular full time regular part time temporary seasonal as needed

5. Which of the following are you available?

Days: yes no **Nights:** yes no **Weekends:** yes no **Holidays:** yes no **Shift Work:** yes no

6. Indicate hours you are available to work on the following days (or check *anytime*, if you have no restrictions):

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

_____ to _____ _____ to _____ _____ to _____ _____ to _____ _____ to _____ _____ to _____ _____ to _____

Anytime Anytime Anytime Anytime Anytime Anytime Anytime

7. Are you able and willing to perform the essential functions of the job for which you are applying, including travel, if necessary?

yes no don't know If no, indicate reason: need different hours need different days need more training
 change in duties

Other, (explain accommodation needed :) _____

8. Are you currently under a non-compete agreement that will prevent you from working for any business in our industry?

yes no If yes, please explain and list the date the agreement expires: _____

EXPERIENCE: List below all present and past employment, beginning with your most recent employer

1. Employer _____ Starting Salary _____ per hour or week
Address _____ Last Salary _____ per hour or week
Kind of Business _____ Supervisor _____
Job Title _____ Reason for Leaving: Quit Discharge Retired
Dates Employed _____ to _____ Laid Off Why? _____
For Job Reference, call _____ at _____
 Please do not contact this employer. Why not? _____

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2. Employer _____ Starting Salary _____ per hour or week
Address _____ Last Salary _____ per hour or week
Kind of Business _____ Supervisor _____
Job Title _____ Reason for Leaving: Quit Discharge Retired
Dates Employed _____ to _____ Laid Off Why? _____
For Job Reference, call _____ at _____
 Please do not contact this employer. Why not? _____

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3. Employer _____ Starting Salary _____ per hour or week

Address _____ Last Salary _____ per hour or week
 Kind of Business _____ Supervisor _____
 Job Title _____ Reason for Leaving: Quit Discharge Retired
 Dates Employed _____ to _____ Laid Off Why? _____
 For Job Reference, call _____ at _____
 Please do not contact this employer. Why not? _____

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4. Employer _____ Starting Salary _____ per hour or week
 Address _____ Last Salary _____ per hour or week
 Kind of Business _____ Supervisor _____
 Job Title _____ Reason for Leaving: Quit Discharge Retired
 Dates Employed _____ to _____ Laid Off Why? _____
 For Job Reference, call _____ at _____
 Please do not contact this employer. Why not? _____

In the following space, please describe how our company will benefit from your work here.

Please list the name, address and contact information of three references who can attest to your knowledge, skill and ability to perform the work for which you are applying. We are seeking business related references, not personal references.

Name: _____ Phone No. (_____) _____

Employer: _____ Location: _____ Position: _____

Name: _____ Phone No. (_____) _____

Employer: _____ Location: _____ Position: _____

Name: _____ Phone No. (_____) _____

Employer: _____ Location: _____ Position: _____

CONDITIONS OF EMPLOYMENT

- I. The facts as stated on this application are true and correct. I understand that, if employed, false statements on this application may cause my immediate dismissal.
- II. I authorize whatever background and personal reports needed to verify that the information I have supplied is true and accurate and to determine my fitness for this job and hold harmless those who have the responsibility to develop such a report. A copy of this authorization is as valid as the original.
- III. **Required Licenses and Permits** All hired employees are in a driving position and are required to maintain a valid Virginia Drivers License. The company may verify each employee's driving record prior to employment and whenever else necessary during the course of employment to ensure compliance. Your driving record is a vital part of your employment application and that you may not be hired due to it.
- IV. I understand that I may be required to work overtime as a condition of being employed.
- V. In consideration of my employment, I agree to conform to the rules and regulations for employees. I understand I am an employee at-will, and that this application is not a contract of employment with Medek Tree Service, Inc., and that my employment and compensation can be terminated, with or without cause, at anytime, at the option of either Medek Tree Service, Inc., or me. I understand that no representative of Medek Tree Service, Inc., has any authority to enter into any verbal agreement for employment for any specified period of time or to make any agreement contrary to the foregoing and that no document, policy or practice of Medek Tree Service, Inc., may change the foregoing unless it is expressly titled "Employment Agreement" and signed by both myself and the President of Medek Tree Service Inc.
- VI. **Drug and Alcohol Testing** In the event the company determines that I am eligible for an offer of employment, I understand that I may be required to participate in blood and/ or urine testing for alcohol, chemical dependency or other substance abuse. I consent to distraction of such testing and I understand that in addition to testing as a part of the application or hiring process I may be subject to future random testing and testing "for cause", which may include involvement in job-related accidents, suspicious behaviors, etc. I understand that in the event that I refuse to consent to such a test or violate the Company's drug and alcohol policy, or test positive for substance abuse or chemical dependency, my application or employment will be disqualified for further consideration or my employment will be terminated without notice. Accommodations will be made for the use of legally prescribed medication under the direction of a physician.
- VII. Upon separation of employment, I authorize Medek Tree Service, Inc., to withhold from my final pay check any monies owed by me (if not prohibited by law) for equipment, loans, products, services, uniforms unreturned, benefits advanced that I have not earned, materials or other assets in my possession not promptly returned or repaid as agreed.
- VIII. **Introductory Period** In the event the company determines that I am eligible for an offer of employment; I understand that I will be required to participate in an introductory period. This Introductory period is intended to give new employees the opportunity to demonstrate their ability to achieve a satisfactory level of performance and to determine whether the new position meets their expectations. Medek Tree Service, Inc. uses this period to evaluate employees' capabilities, work habits, and overall performance. Either the employee or Medek Tree Service, Inc. may end the employment relationship at will at any time during or after the introductory period, with or without cause or advance notice. All new and rehired employees work on an introductory basis for the first 90 calendar days after their date of hire. Any significant absence will automatically extend an introductory period by the length of the absence. Upon satisfactory completion of the introductory period, employees enter the "regular" employment classification.

DATE _____ SIGNATURE _____