



MEADOWS FARMS, INC.  
43054 JOHN MOSBY HWY.  
CHANTILLY, VIRGINIA 20152  
(703) 327-3940 / (703) 327-2641 FAX  
www.meadowsfarms.com

APPLICATION FOR EMPLOYMENT

1) NAME: \_\_\_\_\_  
PRESENT ADDRESS: \_\_\_\_\_

SOCIAL SECURITY #: \_\_\_\_\_ DRIVER'S LICENSE #: \_\_\_\_\_  
TELEPHONE #: \_\_\_\_\_ OTHER PHONE #: \_\_\_\_\_  
EMAIL ADDRESS: \_\_\_\_\_

2) NAME & ADDRESS OF PERSON TO CONTACT IN CASE OF AN ACCIDENT OR EMERGENCY:  
NAME: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_  
RELATION: \_\_\_\_\_

3) HIGHEST GRADE COMPLETED SO FAR: \_\_\_\_\_ ARE YOU OVER 18?: \_\_\_\_\_  
SCHOOLS ATTENDED OR NOW ATTENDING: \_\_\_\_\_

HAVE YOU TAKEN ANY COURSES IN HORTICULTURE, LANDSCAPING OR TURF  
MANAGEMENT: \_\_\_\_\_  
IF YES, PLEASE DESCRIBE: \_\_\_\_\_

LIST ANY PEOPLE YOU KNOW WHO ARE OR HAVE BEEN EMPLOYED BY MEADOWS FARMS:  
\_\_\_\_\_

4) LIST THREE (3) PERSONAL REFERENCES:

	<u>NAME</u>	<u>ADDRESS</u>	<u>PHONE #'S</u>
1)	_____	_____	_____
2)	_____	_____	_____
3)	_____	_____	_____

5) ARE YOU CAPABLE OF REPETITIVE HEAVY LIFTING UP TO 75 lbs.? \_\_\_\_\_

HOW LONG HAVE YOU LIVED IN THIS AREA? : \_\_\_\_\_

HAVE YOU EVER BEEN FIRED OR ASKED TO RESIGN FROM A JOB? : \_\_\_\_\_

IF YES, EXPLAIN: \_\_\_\_\_

HAVE YOU BEEN CONVICTED OR PLEAD GUILTY TO ANYTHING BESIDES A MINOR  
TRAFFIC OFFENSE, IN THE LAST 10 YEARS? :

IF YES, EXPLAIN: \_\_\_\_\_

DO YOU HAVE RELIABLE TRANSPORTATION? : \_\_\_\_\_

DO YOU HAVE A VALID DRIVER'S LICENSE? : \_\_\_\_\_

ARE YOU ARTISTIC? : \_\_\_\_\_ IN WHAT WAY? : \_\_\_\_\_

6) ARE YOU APPLYING FOR:  FULL TIME  PART TIME  SEASONAL

WORKING AT THE:

- SUPPORT OFFICE-WHICH POSITION? \_\_\_\_\_
- NURSERY-WHICH POSTION? : \_\_\_\_\_
- LANDSCAPE DEPT.-WHICH POSITION? : \_\_\_\_\_
- GROUNDS MAINTENANCE-WHICH POSITION? : \_\_\_\_\_

WRITE THE DAYS & HOURS YOU WOULD PREFER TO WORK: \_\_\_\_\_

LIST ANY DATES, DAYS OR HOURS WHEN YOU ARE NOT AVAILABLE TO WORK: \_\_\_\_\_

7) PREVIOUS EMPLOYMENT

<u>NAME OF COMPANY</u>	<u>ADDRESS</u>	<u>PHONE NUMBER</u>
1) _____		
A) NAME OF SUPERVISOR:	_____	
B) TYPE OF WORK PERFORMED:	_____	
C) WHY DID YOU LEAVE JOB? :	_____	
D) DATE EMPLOYED:	_____	RATE OF PAY: _____

<u>NAME OF COMPANY</u>	<u>ADDRESS</u>	<u>PHONE NUMBER</u>
2) _____		
A) NAME OF SUPERVISOR:	_____	
B) TYPE OF WORK PERFORMED:	_____	
C) WHY DID YOU LEAVE JOB? :	_____	
D) DATE EMPLOYED:	_____	RATE OF PAY: _____

<u>NAME OF COMPANY</u>	<u>ADDRESS</u>	<u>PHONE NUMBER</u>
3) _____		
A) NAME OF SUPERVISOR:	_____	
B) TYPE OF WORK PERFORMED:	_____	
C) WHY DID YOU LEAVE JOB? :	_____	
D) DATE EMPLOYED:	_____	RATE OF PAY: _____



The facts set forth in this application are true and correct. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation of my personal history and references through any investigative agencies of your choice. I further understand agree that if I am employed, I have the right to terminate my employment at any time and Meadows Farms, inc., retains a similar right to terminate my employment at any time. I am aware that Meadows Farms, inc. is a drug free workplace. Anyone who is caught under the influence of, possessing, distributing, dispensing, manufacturing illegal drugs, substances or alcohol at work or in the workplace may be terminated immediately. I also understand that at Meadows Farms, Inc., there is random drug and alcohol testing. I further understand and agree to be tested for drugs and /or alcohol if I am involved in an accident where there is personal injury and / or property damage of \$250.00 or more.

SIGNATURE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

This company is an equal opportunity employer. We do not tolerate discrimination in employment based on race, creed, color, national origin or sex. In addition, the age discrimination in employment act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40.

Under Maryland law, an employer may not require or demand, as a condition of employment, that an individual submit to or take a lie-detector or similar test. An employer who violates this law is guilty of a misdemeanor and is subject to a fine not exceeding \$100.