



# EMPLOYMENT HISTORY

PLEASE GIVE AN ACCURATE, COMPLETE FULL-TIME AND PART-TIME EMPLOYMENT RECORD,  
STARTING WITH YOUR MOST RECENT EMPLOYER.

**1.** \_\_\_\_\_  
COMPANY NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_  
\_\_\_\_\_ START \_\_\_\_\_ END \_\_\_\_\_  
ADDRESS \_\_\_\_\_ DATES EMPLOYED \_\_\_\_\_  
\_\_\_\_\_ START \_\_\_\_\_ END \_\_\_\_\_  
NAME OF SUPERVISOR \_\_\_\_\_ WAGES \_\_\_\_\_  
\_\_\_\_\_ \_\_\_\_\_  
NAME OF POSITION OCCUPIED \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_

**2.** \_\_\_\_\_  
COMPANY NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_  
\_\_\_\_\_ START \_\_\_\_\_ END \_\_\_\_\_  
ADDRESS \_\_\_\_\_ DATES EMPLOYED \_\_\_\_\_  
\_\_\_\_\_ START \_\_\_\_\_ END \_\_\_\_\_  
NAME OF SUPERVISOR \_\_\_\_\_ WAGES \_\_\_\_\_  
\_\_\_\_\_ \_\_\_\_\_  
NAME OF POSITION OCCUPIED \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_

**3.** \_\_\_\_\_  
COMPANY NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_  
\_\_\_\_\_ START \_\_\_\_\_ END \_\_\_\_\_  
ADDRESS \_\_\_\_\_ DATES EMPLOYED \_\_\_\_\_  
\_\_\_\_\_ START \_\_\_\_\_ END \_\_\_\_\_  
NAME OF SUPERVISOR \_\_\_\_\_ WAGES \_\_\_\_\_  
\_\_\_\_\_ \_\_\_\_\_  
NAME OF POSITION OCCUPIED \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_

**4.** \_\_\_\_\_  
COMPANY NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_  
\_\_\_\_\_ START \_\_\_\_\_ END \_\_\_\_\_  
ADDRESS \_\_\_\_\_ DATES EMPLOYED \_\_\_\_\_  
\_\_\_\_\_ START \_\_\_\_\_ END \_\_\_\_\_  
NAME OF SUPERVISOR \_\_\_\_\_ WAGES \_\_\_\_\_  
\_\_\_\_\_ \_\_\_\_\_  
NAME OF POSITION OCCUPIED \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_

May we contact the previous employers for references? \_\_\_\_\_

Indicate those you do not want us to contact and the reason: \_\_\_\_\_

PLEASE LIST ALL SCHOOLS ATTENDED:

	Name & Location of School	# Of Years Attended	Graduated? Yes/No
High School			
College Or University			
Others: (Specify)			

Other Accomplishments (Please list below any other job related accomplishments, professional distinctions, certifications, or verifiable volunteer work.): \_\_\_\_\_

\_\_\_\_\_

List Those Persons Willing To Provide Personal And/Or Professional References. (Name, Address, And Phone #)

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

3. \_\_\_\_\_

\_\_\_\_\_

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal and that my employment is dependent on truthful answers to the foregoing inquiries.

Campbell's Nurseries is formally committed to providing equal employment opportunities and will not discriminate against any employee or applicant because of race, color, religion, sex, age, national origin, disability, marital or veteran status.

In consideration of my possible employment, I agree to conform to the rules and regulations of Campbell's Nurseries and my employment compensation can be terminated, with or without cause, and with or without notice, at any time, at the option of either the company or myself. I understand that my employment with the company is not governed by any express or implied contract of employment, either written or oral.

Campbell's Nurseries is committed to a workplace free of drugs & alcohol. I understand that my employment at Campbell's Nurseries is conditional upon passing a drug and/or alcohol screen.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_