

FLOWERAMA EMPLOYMENT APPLICATION

Flowerama does not discriminate on the basis of race, color, national origin, sex religion, age, disability or veteran status, or any other criterion made unlawful under applicable federal or state laws. You are not required to give information responsive to inquiries prohibited by law.

First Name Initial Last Name

Street Address

Mobile Phone Number _____

Daytime Telephone Number which we may contact you: _____

Email Address

EDUCATION

<u>High School/College</u>	<u>Name</u>	<u>City/State</u>	<u>Last Grade Completed</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Have you ever been convicted of a crime? Yes _____ No _____

If **YES** please explain

PREVIOUS EMPLOYMENT

List your current or most recent employment first.

Current Employer: _____

City and State: _____

Telephone Number: _____

Supervisor=s Name and Title: _____

Date of Employment From: _____ To: _____

Ending Wage _____

Previous Employer: _____

City and State: _____

Telephone Number: _____

Supervisor=s Name and Title: _____

Date of Employment From: _____ To: _____

Ending Wage _____

Previous Employer: _____

City and State: _____
 Telephone Number: _____
 Supervisors Name and Title: _____
 Date of Employment From: _____ To: _____
 Ending Wage _____

PLEASE LIST AVAILIBITY: Mon – Saturday 7:00-8:00, Friday until 9:00 and Sunday 9:00-6:00 except Holiday Hours. Subject to change.

Sun	Mon	Tue	Wed	Thu	Fri	Sat

REFERENCES (List 3 school, business or personal references that you give permission for us to contact)

<u>Name</u>	<u>Title</u>	<u>Phone Number</u>	<u>Relationship</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

YOU MUST READ AND SIGN THE FOLLOWING CONDITIONS AND CERTIFICATIONS:

In connection with my application for employment and as a condition of continuing employment, I understand that investigative background inquiries may be made on me including previous employers, schools, consumer credit, criminal convictions, motor vehicle, and other reports. These reports may include information as to my character, work habits, performance, educations, compensations and experience along with reasons for termination of employment from previous employers. Furthermore, I understand that Flowerama may be requesting information from various federal, state and other agencies which maintain records concerning my past activities relating to my driving, credit, criminal, civil, and other experiences as well as claims involving me in the files of insurance companies. I authorize without reservation, any party or agency contacted to furnish the above mentioned information and I hereby consent to Flowerama obtaining the above information from the previous employers, various governmental activities and agencies and from the provided reference. I hereby release from all liability or responsibility all persons, companies, organizations or corporations furnishing such information to Flowerama and as well as Flowerama, Flowerama of America Inc and any other affiliates who may be the recipients of such information.

I certify that the information I have furnished on this application form is true and complete. I understand that any misleading or incorrect statements, verbally or in writing, or the incomplete filling out of the application may render this application void and, if employed, may be cause for immediate dismissal.

I understand I must provide satisfactory documents to establish my identity and right to work in the United States, if I am offered a position with the company and the failure to provide this evidence will result in the termination of my employment.

All hiring and employment by Flowerama is at will. I understand this application is not an employment contract, nor can it be used to create one. Employment by Flowerama has no specific term and may be terminated by the employee or Flowerama with or without notice. I

acknowledge that Flowerama has not made any promises or representations that differ from those contained in this paragraph. This at-will provision may only be modified or waived by a written agreement signed by the President and me. I further understand that I am responsible for being familiar with Flowerama policies and I understand that Flowerama has complete discretion to modify its policies, rules, regulations and practices at any time, to the extent permitted by federal, state and local law. If I am employed with Flowerama, I consent to any such changes.

Applicants Signature

Date