



1124 West Front St.  
Lincroft, NJ 07738  
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T. 732-530-3838

**AN EQUAL OPPORTUNITY EMPLOYER**

It is the policy of Colonial Nursery, Inc. to provide employment opportunities without regard to race, color, religion, sex, national origin, age, handicap, or veteran status.

**Date of Application** \_\_\_\_\_.

**PERSONAL DATA**

First Name \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Present Address (in Full) \_\_\_\_\_

Telephone # - Home \_\_\_\_\_ Cell \_\_\_\_\_

Are you legally authorized to work in the United States? \_\_\_\_\_

Visa Type if Available \_\_\_\_\_ Visa Number & Expiration Date \_\_\_\_\_

**Job Position Information:**

*Note: If you have a resume please attach it to this application.*

**Position Being Applied For: (Circle All that you are Applying for)**

- \*Garden Center Laborer
- \*Visual Merchandiser / Sales
- \*Potting Bench / Designer of Living Floral Arrangements
- \*General Sales Person
- \*Cashier / phone operator / retail area upkeep
- \*Driver / Delivery Person – (attach copy of Drivers License)
- \*Landscape Designer / Sales
- \*Landscape Installation Crew Member
- \*OTHER:

**Provide a brief description of your work experience and how it will pertain to your application:**

**Type of Position you are Applying for:**

Part Time \_\_\_\_\_ Full Time \_\_\_\_\_

Are you willing to work weekends? \_\_\_\_\_

How soon following notification can you report to work? \_\_\_\_\_

Were you referred by a friend? \_\_\_\_\_

**Skills that pertain to the job you are applying for:**

**(Be as specific as possible and use a separate sheet of paper if necessary)**

**OTHER:**

Do you enjoy working with people? \_\_\_\_\_

Would you consider yourself a high energy person? \_\_\_\_\_

What is your favorite time of the day? Mornings, Afternoons, Nighttime \_\_\_\_\_

What hobbies do you have? \_\_\_\_\_

Are you a self-motivated person or do you look for direction? \_\_\_\_\_

**EMPLOYMENT HISTORY:**

**PRESENT OR MOST RECENT EMPLOYER (Attach a copy of your last pay stub)**

**Date Begin / Date End** \_\_\_\_\_

**Full Name of Company** \_\_\_\_\_

**Street Address** \_\_\_\_\_

**Name & Title of Supervisor** \_\_\_\_\_

**Title of Your Position** \_\_\_\_\_

**MISCELLANEOUS INFORMATION:**

**DO YOU HAVE A VALID DRIVERS LICENSE? \_\_\_\_\_ LICENSE NUMBER \_\_\_\_\_**  
State: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**HAVE YOU EVER BEEN CONVICTED OF OR SENTENCED FOR ANY VIOLATION OF THE LAW?  
IF YES, GIVE FULL PARTICULARS.**

**THE EXISTENCE OF A CRIMINAL RECORD DOES NOT CONSTITUTE AN AUTOMATIC BAR TO  
EMPLOYMENT**

**SIGNATURE** \_\_\_\_\_

**Today's DATE:** \_\_\_\_\_