 **WRIGHT TREE SERVICE, INC.**

APPLICATION FOR EMPLOYMENT EQUAL OPPORTUNITY EMPLOYER

|  |  |  |
| --- | --- | --- |
|  | APPLICATION DATE | SOCIAL SECURITY NUMBER |
| FIRST NAME | MIDDLE | LAST NAME |
| STREET ADDRESS |
| CITY | STATE | ZIP |
| PREVIOUS DATES OF EMPLOYMENT AT WRIGHT TREE SERVICE, IF ANY: | HOME PHONE | CELL PHONE |
| IF APPLYING FOR A SPECIFIC POSITION, LIST IT HERE: |

**PERSONAL INFORMATION**

**REQUIRED INFORMATION**

|  |  |  |  |
| --- | --- | --- | --- |
| DO YOU HAVE A VALID DRIVERS LICENSE?DO YOU HAVE MORE THAN ONE LICENSE? | YesYes | NoNo | IF YES, PLEASE LIST  |
| DRIVERS LICENSE NUMBER | CLASS | STATE |
| LIST ALL MOTOR VEHICLE ACCIDENTS ( DATE AND SPECIFIC CHARGES ) |
|  |
| LIST ALL MOVING VIOLATIONS ( DATE AND SPECIFIC CHARGES ) |
|  |
| LIST ALL STATES AND COUNTRIES YOU'VE LIVED IN |
| ARE YOU ELIGIBLE TO WORK IN THE UNITED STATES? | Yes | No |

WRIGHT TREE SERVICE, INC. RESERVES THE RIGHT TO CONDUCT A DETAILED BACKGROUND INVESTIGATION OF ANY APPLICANT, WHICH MAY INCLUDE MOTOR VEHICLE DRIVING RECORDS AND CRIMINAL RECORD CHECKS FOR CRIMINAL ACTIVITY WITHIN THE PREVIOUS 7 YEARS.

CONVICTION(S) WILL NOT NECESSARILY BAR APPLICANT FROM EMPLOYMENT. EACH INSTANCE AND EXPLANATION WILL BE CONSIDERED IN RELATION TO THE POSITION FOR WHICH APPLICANT IS APPLYING.

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**WRIGHT TREE SERVICE** PO BOX 1718 DES MOINES IA 50306 **PHONE** 515.277.6291 **FAX** 515.274.3852 wrighttree.com

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### PRIOR WORK HISTORY

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| DURATION: FROM (MM/YY) TO (MM/YY) | NAME, ADDRESS AND TELEPHONE NUMBER OF EMPLOYER(S) | PAY RATE | POSITION HELD | REASON FOR LEAVING |
|  |  |  |  |  |
|  |  |  |  |  |

**SPECIAL INTERESTS AND SKILLS**

|  |
| --- |
| MILITARY SERVICE ( BRANCH, LOCATION AND YEARS ENLISTED ) |
| SPECIAL SKILLS AND/OR TRAINING |
|  |

**EDUCATIONAL BACKGROUND**

|  |  |
| --- | --- |
| HIGH SCHOOL NAME AND LOCATION | DATES ATTENDED |
| COLLEGE NAME AND LOCATION | MAJOR | DATES ATTENDED |
| BUSINESS, TRADE OR MISC CLASSES | SUBJECTS STUDIED | DATES ATTENDED |

AUTHORIZATION

I certify that the information I have provided in this application is true and complete and I understand that one or more falsified statements within this application is grounds for termination of employment. I authorize investigation of all statements contained herein and employers listed within to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and I release the company from all liability for any damage that may result from use of said information. This waiver does not permit the release or use of disability related or medically related information in a manner prohibited by the Americans with Disabilities Act (ADA) or other relevant federal and state laws.

|  |  |
| --- | --- |
| DATE | SIGNATURE |
| APPLICANT, PLEASE DO NOT WRITE BELOW THIS LINE - FOR COMPANY USE ONLY |
| INTERVIEWER'S COMMENTS |
|  |
|  |
|  |
|  |
|  |
|  |
| LANGUAGE PREFERENCE FOR HANDBOOKS, ETC (IF BLANK, ENGLISH VERSION WILL BE USED) | INTERVIEW DATE | INTERVIEWED BY: |

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# WrightLogo_black from brescia may2012.jpgEMPLOYMENT APPLICANT ACKNOWLEDGEMENT

In an effort to maintain a safe and productive work environment, Wright Tree Service has established a Drug and Alcohol Prevention Program. Therefore, a drug screen test has been integrated into the pre-employment medical examination.

Further, it is the policy of Wright Tree Service not to hire or rehire individuals who abuse alcohol or use any narcotic or dangerous drug without a medically acceptable prescription.

I understand that as a condition of employment I must successfully pass a urinalysis drug screen test for cannabinoids (marijuana and its metabolites), cocaine/crack and metabolites, opiates (heroin, codeine, morphine, oxycontin, and related drugs), phencyclidine (PCP), amphetamines (including methamphetamine and ecstasy), barbiturates, benazodiazepines (including xanax), propoxyphene and metabolites, and methadone. Additionally, I understand that in some locations an oral drug test for these listed compounds may also be a condition of employment.

All information relative to the medical examination and drug test will be used and maintained in strict conformity with the law.

I further understand that once employed I may be required to submit to a urine drug screen test and/or an oral drug screen test. If the test results are positive for prohibited drugs or alcohol, or if I refuse to undergo a test upon the request of Wright Tree Service, I may be terminated.

#### ACKNOWLEDGMENT

I, (print name), acknowledge that I have read and understand the policy noted above.

Applicant’s Signature Date

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# MINIMUM JOB REQUIREMENTS

**DESCRIPTION ACKNOWLEDGEMENT**

##### Job Requirements Reference is Provided on Following Page for Distribution to Applicant

YES

NO I have been provided a copy of the job requirements and/or the job functions have been explained to me.

YES

NO I understand the requirements of the job.

YES

NO I can perform all the functions of the job.

(NOTE: A negative answer will not preclude your being considered for this job.)

If you answered “NO”, please use the provided space below to identify each and every function or task which you are unable to perform.

YES

NO I understand that the provided description(s) are not necessarily an exhaustive list of the job duties and requirements associated with this job, but rather are intended to represent an accurate reflection of the current job. Furthermore, management reserves the right to add, delete, and/or modify any of the job duties or requirements at any time.

Date:

Applicant Signature:

Printed Name:

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**MINIMUM JOB REQUIREMENTS FOR EMPLOYEES**

**FOR DISTRIBUTION TO APPLICANT**

THE FOLLOWING MAY BE ROUTINE IN THE CAPACITY OF GROUNDMAN/DRIVER OR ABOVE

1. A state-issued Driver’s License or Commercial Driver’s License is recommended and may be required for certain job assignments, functions, or State and Federal Regulations.
2. Must have or obtain valid First Aid and CPR cards.
3. Must take company written test and driving test as required.
4. Must have a valid medical certificate to drive a company vehicle 10,001 lb GVWR or GVW and greater.
5. Overnight travel and afterhours emergency response work may be required.
6. Ability to perform in the following capacities as required:
	1. Safeguard employees and public from hazards in and around work area
	2. Participate in the practice and enforcement of on-the-job safety
	3. Apply herbicide and/or growth regulator chemicals to stumps and/or vegetation
	4. Drive a truck with attached brush chipper
	5. Load and unload logs, brush, and debris onto trucks, and/or feed brush into brush chipper
	6. Use hand-lines to lower limbs and/or equipment
	7. Keep work area orderly
	8. Work in an outdoor environment
	9. Work from ground using gasoline-powered chainsaws
	10. Carry, prepare, and/or lay out materials, tools, and equipment at work site
	11. Ensure proper maintenance, upkeep, and cleaning of trucks and/or equipment; report need for any repairs to crew foreman.
	12. Perform other related duties as required/assigned

THE FOLLOWING PHYSICAL DEMANDS MAY BE ROUTINE AT THE JOB LEVEL OF TRIMMER OR ABOVE

|  |  |  |  |
| --- | --- | --- | --- |
| ACTIVITY | HOURS OF: | ACTIVITY | HOURS OF: |
| SIT | 1-3 HRS | PUSH | 3-5 HRS |
| STAND | 5-8 HRS | PULL | 3-5 HRS |
| WALK | 1-3 HRS | REACH | 3-5 HRS |
| GRASP | 3-5 HRS | TWIST | 3-5 HRS |
| STAIRS | N/A | LADDER | 1-3 HRS |
| BALANCE | 5-8 HRS | KNEEL/SQUAT | 1-3 HRS |
| BENDING (at waist) | 1-3 HRS | STOOP | 1-3 HRS |
| DRIVING VEHICLES | 3-5 HRS | OPERATING MACHINERY | 1-3 HRS |

LIFT/CARRY CAPACITY DEMANDS MAY BE ROUTINE AS FOLLOWS

|  |  |  |
| --- | --- | --- |
| SEDENTARY | 10 LBS | 3-5 HRS |
| LIGHT | 10-20 LBS | 3-5 HRS |
| MEDIUM | 20-50 LBS | 3-5 HRS |
| HEAVY | 50-100 LBS | 1-3 HRS |
| VERY HEAVY | OVER 100 LBS | 1-3 HRS |

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