

NW PREMIER TREE SERVICES LLC

EMPLOYMENT APPLICATION

Applicant Full Name: _____

Phone Number: _____

Email Address: _____

Address: _____

City: _____

State: _____

Zip: _____

LEGAL ELIGIBILITY

Are you at least 18 years of age? Yes ____ No ____

Are you legally authorized to work in the United States? Yes ____ No ____

POSITION INFORMATION

Desired Position (Tree Climber / Foreman / Groundsman / Other):

If "Other," please describe: _____

Available Start Date: _____

Desired Pay Rate: _____

AVAILABILITY

Are you willing to work weekends? Yes ___ No ___

Are you willing to work part time? Yes ___ No ___

Are you willing to work overtime? Yes ___ No ___

How did you hear about this position? _____

LICENSE & LANGUAGE

Do you have a valid driver's license? Yes ___ No ___

Are you fluent in English for the duties required in this role? Yes ___ No ___

Do you speak any additional languages that may be useful in this position? If yes, please list them: _____

TREE INDUSTRY EXPERIENCE

Years of experience: 0–1 yr ___ 1–3 yrs ___ 3–5 yrs ___ 5+ yrs ___

Equipment Experience: Chainsaws ___ Rigging ___ Climbing ___ Bucket Truck ___

Chipper ___ Mini Skid Steer ___ Trucks/Trailers ___ CDL ___

PHYSICAL REQUIREMENTS

Lift 50–75 lbs: Yes ___ No ___

Work at heights: Yes ___ No ___

All-season outdoor work: Yes ___ No ___

CERTIFICATIONS

ISA Certified Arborist: Yes ___ No ___

CPR / First Aid: Yes ___ No ___

EHAP: Yes ___ No ___

Other certifications: _____

EMPLOYMENT HISTORY – PRIMARY

Company Name: _____

Position: _____

Address: _____

Phone: _____

Supervisor Name: _____

Dates Employed: _____ to _____

Reason for Leaving: _____

ADDITIONAL EMPLOYMENT HISTORY (OPTIONAL)

Company Name: _____

Position: _____

Address: _____

Phone: _____

Supervisor Name: _____

Dates Employed: _____ to _____

Reason for Leaving: _____

Company Name: _____

Position: _____

Address: _____

Phone: _____

Supervisor Name: _____

Dates Employed: _____ to _____

Reason for Leaving: _____

REFERENCES (NON-FAMILY)

Reference 1:

Name: _____ Relationship: _____

Phone: _____

Reference 2: Name: _____ Relationship: _____

Phone: _____

Reference 3: Name: _____ Relationship: _____

Phone: _____

RESUME ATTACHMENT

Resume attached: Yes ____ No ____

DISCLAIMER & AUTHORIZATION

I certify the information provided is true and authorize verification by NW Premier Tree Services LLC. Any false information may result in disqualification or termination.

Applicant Signature: _____ Date: _____

Printed Name: _____