



Latta Corp
— OF CENTRAL FLORIDA —
Treating lawns with a “LATTa” love!

EMPLOYEE APPLICATION

APPLICANT DATA

Last Name: _____ First Name: _____ Middle Name: _____
Date of Birth: _____ Age: _____ E-mail Address: _____
Cell Phone #: _____ Home Phone #: _____
Date Available to Start: _____ Social Security #: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Have you ever worked for this company? ☐ Yes ☐ No If yes, when? _____

EMPLOYMENT LEGIBILITY DATA

Type of employment your Applying for: ☐ Part- Time ☐ Full-Time ☐ Seasonal ☐ Temporary
Type of crew your Applying for (Select all that Apply): ☐ Mulching ☐ Tree Trimming ☐ Lawn Maintenance ☐ Other Landscaping
Are you a citizen of the United States? ☐ Yes ☐ No Are you legally allowed to work in the United States? ☐ Yes ☐ No
Have you ever pled “guilty,” “no contest,” or been convicted of a crime? ☐ Yes ☐ No
If you said yes, please provide dates and details: _____

Driver's License #: _____ State: _____

Answering “yes” to these questions does **not** constitute an immediate or automatic rejection for employment. Date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be considered by the LattaCorp application management team.

EMERGENCY CONTACT(S)

Primary Emergency Contact: _____ Contact Number: _____
Secondary Emergency Contact: _____ Contact Number: _____

EDUCATIONAL BACKGROUND

High School Diploma/GED

Name of Institution: _____ Address: _____
Did you Graduate? ☐ Yes ☐ No GPA: _____ Date Graduated: _____ # of Years Completed: _____
If you said no, please explain why: _____

College/ University

Name of Institution: _____ Address: _____
Did you Graduate? ☐ Yes ☐ No GPA: _____ Date Graduated: _____ # of Years Completed: _____
If you said no, please explain why: _____
If you said yes, please list the Degree(s) you Earned: _____

PREVIOUS EMPLOYMENT (List 3 starting with the most recent):

JOB 1

Name of the place of previous employment: _____ Address: _____
Phone: _____ Supervisors Name: _____
Position(s) Held: _____ Year(s) Employed: From: _____ To: _____
Was your employment terminated or did you leave? ☐ Terminated ☐ I left
What was the reason? _____
May we contact this employer as a reference? ☐ Yes ☐ No

PREVIOUS EMPLOYMENT (List 3 starting with the most recent):

JOB 2

Name of the place of previous employment: _____

Phone: _____ Supervisors Name: _____

Position(s) Held: _____

Was your employment terminated or did you leave? ☐ Terminated ☐ I left

What was the reason? _____

May we contact this employer as a reference? ☐ Yes ☐ No

JOB 3

Name of the place of previous employment: _____

Phone: _____ Supervisors Name: _____

Position(s) Held: _____

Was your employment terminated or did you leave? ☐ Terminated ☐ I left

What was the reason? _____

May we contact this employer as a reference? ☐ Yes ☐ No

REFERENCES

REFERENCE 1

First Name: _____ Middle Name: _____ Last Name: _____

E-mail Address: _____ Cell Phone #: _____

Address: _____ City: _____ State: _____ Zip Code: _____

REFERENCE 2

First Name: _____ Middle Name: _____ Last Name: _____

E-mail Address: _____ Cell Phone #: _____

Address: _____ City: _____ State: _____ Zip Code: _____

SKILLS & QUALIFICATIONS:

What skills did you obtain or improve on from your previous employment?

Do you have a certifications? If yes, list them below:

What do you hope to achieve by working at lattacorp?

APPLICANTS SIGNATURE

By signing below and submitting this application, I confirm that the information provided by me, is accurate and complete to the best of my knowledge. I understand that any false information may disqualify me from consideration for employment. I I authorize you to make such investigations and inquiries of my personal, employment, educational, financial, or medical history and other related matters that may be necessary for an employment decision. I hereby release employers, schools, or persons from all liability when responding to inquiries in connection with my application.

In the event I am employed, I understand that false or misleading information given in my application or interview(s) may result in the termination of my employment.

Applicant's Signature

Date