

South River Irrigation Ltd 540 Lee Jackson Hwy, Staunton, VA 24401 Office 540-885-5242

APPLICATION FOR EMPLOYMENT

South River Irrigation Ltd and J.W. Townsend Landscapes do not discriminate in employment with regard to race, color, religion, age, sex, national origin, disability status, genetics, protected veteran status, sexual orientation, gender identify, or any other characteristic protected by federal, state, or local laws.

PLEASE PRINT CLEARLY AND COMPLETE ALL SECTIONS

| If you need help filling out this application form or for any phase you this form and every effort will be made to accord | | | | | |
|--|--------------|--|--|--|--|
| NAME (FIRST, MIDDLE, LAST) | TODAY'S DATE | | | | |
| | | | | | |
| CURRENT ADDRESS (Street, City, State, Zip Code) | | | | | |
| | | | | | |
| RESIDENT ADDRESS (Street, City, State, Zip Code) | | | | | |
| (if different from above) | | | | | |
| EMAIL ADDRESS | | PHONE NUMBER & BEST TIME TO CALL | | | |
| | | | | | |
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| EMPLOYME | NT DESI | IRED | | | |
| POSITION APPLIED FOR: | | | | | |
| | | | | | |
| ARE YOU ABLE TO PERFORM THE ESSENTIAL FUNCTIONS OF THE | IOB FOR W | /HICH YOU ARE APPLYING FOR WITH OR WITHOUT A | | | |
| REASONABLE ACCOMMODATION? | | | | | |
| ☐ Yes ☐ No | | | | | |
| DATE AVAILABLE □ FULL TIME □ PART TIME □ SEASONAL □ TEMPORARY | | | | | |
| The second a | | | | | |
| HAVE YOU EVER WORKED FOR SOUTH RIVER IRRIGATION BEFORE? | | IF YES, WHEN AND IN WHICH DEPARTMENTS? | | | |
| ☐ Yes ☐ No | | | | | |
| HAVE YOU EVER APPLIED TO SOUTH RIVER IRRIGATION BEFORE? | | IF YES, WHEN? | | | |
| ☐ Yes ☐ No | | | | | |
| To comply with the Immigration Reform and Control Act of 1986, if you | | | | | |
| identity and your authorization to be employed in the United States. Sur following your hire, or upon your first work day if your employment per | | | | | |
| HOW WERE YOU REFERRED TO SOUTH RIVER IRRIGATION? | | | | | |
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| HAVE YOU EVER BEEN | CONVICTED OF A CRIME | (MISDEMEANOR OR FELONY)? \Box | ☐ Yes ☐ No | | |
|--|-------------------------------|---------------------------------------|----------------------------|----------------------------|--|
| IF YES, EXPLAIN (Where | e, When, Sentence): | | | | |
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| | | | | | |
| Disclosure of a criminal re | scord will not necessarily di | squalify you for employment. Each c | onviction will be evaluate | ad an its own marits with | |
| | | lation to the job for which you are a | | ed on its own ments with | |
| | | | | | |
| | | RECORD OF EDUCATIO | N | | |
| NAME AND LOCATION OF SCHOOL | | L GRADUATED | DEGREE | MAJOR OR FIELD OF STUDY | |
| | | □ Yes | | | |
| HIGH SCHOOL | | □ No | | | |
| | | □ Yes | | | |
| COLLEGE | | □ No | | | |
| | | | | | |
| TRADE, BUSINESS OR CORRESPONDENCE | | ☐ Yes ☐ No | | | |
| SCHOOL | | | | | |
| | | IONS YOU BELONG TO, AS WELL | AS SKILLS, TRAINING, (| OR EXPERIENCE THAT | |
| WOULD ENHANCE YOU | IR ABILITY TO PERFORM | THE POSITION APPLIED FOR | | | |
| | | | | | |
| | | | | | |
| DO VOLLBOSSESS A VAL | LID DRIVER'S LICENSE? [| J Vos. □ No. | | | |
| DO TOU POSSESS A VAI | LID DRIVER 3 LICENSE? L | ⊥ res ∟ no | | | |
| DRIVER'S LICENSE NUMBER AND STATE | | | | | |
| | | | | | |
| HAVE YOU EVER BEEN A MEMBER OF THE ARMED FORCES OF THE UNITED STATES? ☐ Yes ☐ No | | | | | |
| TARKE TOO EVER DEEN A MILMIDER OF THE ARMED FORCES OF THE OMITED STATES: TOS TO | | | | | |
| IF YES, LIST ANY SPECIAL SKILLS OR ABILITIES YOU DEVELOPED WHILE IN MILITARY SERVICE THAT DIRECTLY RELATE TO THE | | | | | |
| POSITION APPLIED FOR. | | | | | |
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| | | | | | |
| | | REFERENCES | | | |
| INDIVIDUALS FAMILIAR WITH YOUR WORK ABILITY – DO NOT INCLUDE RELATIVES | | | | | |
| NAME | | PHONE NUMBER | RELATI | ONSHIP/YEARS KNOWN | |
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| EXPERIENCE | | | | | | | |
|---|--|-------------------------------|-----------------------------|----------------|--------|--------------------|--|
| | | MOST REC | CENT EXPERIENCE | E FIRST | | | |
| NAME AND ADDRESS OF | STARTING | ENDING | DATES | SALARY | | DEACON FOR LEAVING | |
| EMPLOYER | POSITION | POSITION | EMPLOYED | STARTING | ENDING | REASON FOR LEAVING | |
| 1. | | | FROM | | | | |
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| | | | то | | | | |
| | | | | | | | |
| EMPLOYER PHONE NUMBER: | | NAME AND TITLE OF SUPERVISOR: | | | | | |
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| 2. | | | FROM | | | | |
| | | | | | | | |
| | | | то | | | | |
| | | | | | | | |
| EMPLOYER PHONE NUMBER: | | NAME AND TITLE OF SUPERVISOR: | | | | | |
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| 3. | | | FROM | | | | |
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| | | | то | | | | |
| | | | | | | | |
| EMPLOYER PHONE NUMBER: | | NAME AND TIT | TE OF SUPER\ | /ISOR: | | | |
| | | | | | | | |
| 4. | | | FROM | | | | |
| | | | | | | | |
| | | | то | | | | |
| | | | | | | | |
| EMPLOYER PHONE NUMBER | <u> </u> | | NAME AND TIT | I E OE SLIDED/ | /ISOP: | | |
| LIVII LOTER I HOIVE IVOIVIDER. | | NAIVIL AND III | LL OI JUFLIN | rison. | | | |
| MAY WE CONTACT THE EMPLOYERS LISTED ABOVE? | | | | | | | |
| | | | | | | | |
| If no, indicate by number which one(s) you do not want us to contact: | | | | | | | |

Use this space to describe any previous work history and to detail particular job responsibilities listed above. Include any additional information that may be relevant to the job for which you are applying i.e., irrigation training, irrigation education, related irrigation equipment experience, etc.

CERTIFICATION AND RELEASE

I hereby certify that all statements made in this application are true and correct to the best of my knowledge and belief. I understand and agree that any misrepresentation or omission of facts in my application may be justification for refusal to hire, or termination of employment.

I further understand that an investigative report may be made as to my character and general reputation. I authorize all past employers, schools, persons and organization having relevant information or knowledge to provide it to South River Irrigation Ltd and J.W. Townsend Landscapes or its duly authorized representative for its use in deciding whether or not to offer me employment and specifically waive any required written notification. I hereby release employers, schools, persons and organizations from all liability in responding to inquiries in connection with my application.

I understand that nothing contained in this employment application or in the granting of an interview is intended to create and employment contract between South River Irrigation Ltd and J.W. Townsend Landscapes and me for either employment or for the providing of any benefit. If any employment relationship is established, I understand that my employment can be terminated, with or without cause, at the option of either South River Irrigation, J.W. Townsend Landscapes, or myself.

In signing this form, I certify that I understand all the questions and statements in this application.

| South River Irrigation Ltd is own | ned and operated by J.W. Towns | send, Inc. | | | | | | |
|-----------------------------------|---------------------------------|------------------------|-------------|-------------|---------------------|--|--|--|
| | | | | | | | | |
| SIGNATURE OF APPLICANT | | | | DATE | | | | |
| Plea | se send your completed applicat | tion to <u>hiring@</u> | Otownsendla | ndscape.com | | | | |
| | | | | | | | | |
| | FOR EMPLO | YER USE C | ONLY | | | | | |
| DATE APPLICATION RECEIVED | | REFERRAL SOURCE | | | | | | |
| INTERVIEWED BY | DEPARTMENT | | | | | | | |
| REFERENCE CHECK COMPLETE | D (DATE, BY WHOM, AND RESUL | TS) | | | | | | |
| ACTION AND REASON | | | | | | | | |
| | IF H | HIRED | | | | | | |
| DEPARTMENT | POSITION | | M | ANAGER | | | | |
| START DATE | WAGE/SALARY | | ☐ Full-Tim | | DRIVER? ☐ Yes ☐ No | | | |