



**KEY FLORAL INC.**

**522 DONALD STREET  
BEDFORD, NH 03110**

**Office Phone (603) 314-0855 ♦ Fax (603) 624-9451**

**Please Print in Ink & Complete ALL Information Fields:**

Name: Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_ Preferred \_\_\_\_\_

Address: Number & Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

( ) - \_\_\_\_\_

Email Address \_\_\_\_\_ Phone # \_\_\_\_\_ Salary Desired: \_\_\_\_\_

Age:  18 and Over  Under 18

If under 18, can you submit a work permit if requested in this state?  Yes  No  N/A

- What position are you applying for? \_\_\_\_\_
- How did you hear about this opportunity? \_\_\_\_\_ Date Available to Start: \_\_\_\_\_
- Do you have prior work experience in the position for which you are applying?  Yes  No

**HOURS AVAILABLE FOR WORK**

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
to	to	to	to	to	to	to

**EDUCATION & TRAINING**

College, University, Other (e.g. Military, Technical, etc.)	Years Completed	Degree Type	Major	Grade Point Average	Grade Point Scale
High School	Graduated		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> GED	

**MILITARY SERVICE**

Branch	Highest rank achieved	Time spent in Military
Describe duties and training		

An affirmative response to this question is viewed as only part of the total employment process. A positive answer will not necessarily bar you from employment. The nature, severity & date of occurrence are considered in making the employment decision.

• Have you ever been convicted of a felony?  Yes  No

If you answered "yes", please describe fully the criminal conviction(s), listing the nature of the offense(s), and the date(s) of the offense(s) and conviction(s): \_\_\_\_\_

• Are you able, at the time of employment, to submit verification of your legal right to work in the U.S.?  Yes  No

Please complete employment history **and** attach resume for review. (Use an additional application if necessary to complete your employment history). Account for all time since leaving High School, or the last seven years. Include Military Service and all periods of unemployment exceeding 30 days. Begin with the most recent.

May we contact your present employer?  Yes  No

EMPLOYMENT HISTORY			
Company Name: _____	Street: _____	City: _____	State: _____
Title _____	Supervisor's Name _____	Phone ( ) _____	
<input type="checkbox"/> Full time	<input type="checkbox"/> Part time	Employed From _____	To _____ Starting Salary _____ Final Salary _____
Describe Job Responsibilities: _____ _____			
Reason for leaving: _____			

Company Name: _____	Street: _____	City: _____	State: _____
Title _____	Supervisor's Name _____	Phone ( ) _____	
<input type="checkbox"/> Full time	<input type="checkbox"/> Part time	Employed From _____	To _____ Starting Salary _____ Final Salary _____
Describe Job Responsibilities: _____ _____			
Reason for leaving: _____			

Company Name: _____	Street: _____	City: _____	State: _____
Title _____	Supervisor's Name _____	Phone ( ) _____	
<input type="checkbox"/> Full time	<input type="checkbox"/> Part time	Employed From _____	To _____ Starting Salary _____ Final Salary _____
Describe Job Responsibilities: _____ _____			
Reason for leaving: _____			

<ul style="list-style-type: none"> <li>• Merchandisers work daytime hours (Monday, Tuesday, Thursday, and Friday) plus a weekend visit (Saturday or Sunday). No night shifts available. Service start times vary between 6AM – 9AM depending on service location and product delivery schedule. Increased hours, early start times, and altered schedules must be expected during floral holiday periods.</li> </ul>	
<ul style="list-style-type: none"> <li>• Do you have any recurring schedule conflicts that need to be considered for adjustments to the normal service schedule discussed above?</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Please Explain: _____	
<ul style="list-style-type: none"> <li>• Weekend visits are minimal but required for all merchandisers in accordance with individual service location requirements. Are you available for the following weekend coverage schedule, 3pm to 5pm Saturday or 9am to 11am Sunday depending on service location?</li> </ul>	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
Please Explain: _____	

In signing this application for employment I understand that any misleading, incorrect, or dishonest statements or omissions of facts are cause for immediate dismissal if I am employed. I hereby authorize the company to investigate thoroughly the information I have shown on this application for employment. I hereby release the company and any former employer and any third party from any liability whatsoever that may be imposed as a result of the release of such information. I certify that all statements made by me on this application are true and complete to the best of my knowledge, and I have withheld nothing that would, if disclosed, effect this application unfavorably. I understand that any false, inaccurate, or omitted statements of a material fact could be cause for rejection of my application or termination of my employment at any time.

I hereby acknowledge that I have read and understand the above statement.

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_