

Application for Employment

Greater Des Moines Botanical Garden

Thank you for your interest in employment with our organization. We are an equal opportunity employer and give employment and promotional consideration without regard to race, color, sex, religion, age, national origin, marital or veteran status, disability, sexual orientation, gender identity, or any other protected class as defined by local, state, or federal law. We seek applicants for employment who are qualified, dedicated, hardworking, and who seek fulfilling employment.

Applicants seeking reasonable accommodation in the application and/or interview process should contact bgbr@dmbotanicalgarden.com.

Applicants may be subject to a background check and drug testing. If applicable, employment is conditional based upon the results of the background and drug screenings.

Applications are active for 30 days or until the position is closed, but remain on file for one year.

| PERSONAL INFORMATION | | | |
|---|--|--|--|
| Name: | | Date of Application: | |
| Address: | | Phone: | |
| City, State, Zip: | | Email: | |
| Are you 18 years or older? | <input type="checkbox"/> Yes <input type="checkbox"/> No | Upon employment, can you provide genuine documentation establishing your identity and employment eligibility? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| EMPLOYMENT DESIRED | | | |
| Availability: | | Position Desired: | |
| <input type="checkbox"/> Full time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> Weekdays <input type="checkbox"/> Weekends <input type="checkbox"/> Mornings <input type="checkbox"/> Afternoons <input type="checkbox"/> Evenings <input type="checkbox"/> Nights <input type="checkbox"/> Varies | | Date you can start: | |
| Referred by: | | Pay Desired: | |
| Have you ever applied to this company before? | <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, where and when? | |
| EDUCATION | | | |
| Did you graduate from High School or receive an equivalent degree? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| Other Formal Education | Name of School, City, and State | Degree Obtained | |
| HIGHEST LEVEL | | | |
| SECOND HIGHEST LEVEL | | | |
| THIRD HIGHEST LEVEL | | | |
| PROFESSIONAL TRAINING OR CERTIFICATIONS | | | |
| GENERAL | | | |
| Omit any organization or activity which reflects your race, color, sex, religion, age, national origin, marital or veteran status, disability, sexual orientation, gender identity, or any other protected class as defined by local, state, or federal law. | | | |
| List any special course, seminars, training or volunteer experience that relates to the position for which you are applying. | | | |
| | | | |
| List any professional, trade, or civic organizations that relate to the position for which you are applying. | | | |
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| List any additional information you feel may be helpful to us in considering your application: | | | |
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| FORMER EMPLOYERS | | | |
|---|---------------------|--------------------------|--|
| List your last three employers, starting with most recent. "See Attached Resume" is not accepted. | | | |
| Dates of Employment | | Name of Employer: | |
| From: | To: | Employer Address: | |
| Last Position Held: | Rate of Pay: | | |
| Reason for Leaving: | | | |
| List jobs held, duties performed, skills used or learned, advancements, or promotions, and what you liked most and least about this job. | | | |
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|---|---------------------|--------------------------|--|
| Dates of Employment | | Name of Employer: | |
| From: | To: | Employer Address: | |
| Last Position Held: | Rate of Pay: | | |
| Reason for Leaving: | | | |
| List jobs held, duties performed, skills used or learned, advancements, or promotions, and what you liked most and least about this job. | | | |
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|---|---------------------|--------------------------|--|
| Dates of Employment | | Name of Employer: | |
| From: | To: | Employer Address: | |
| Last Position Held: | Rate of Pay: | | |
| Reason for Leaving: | | | |
| List jobs held, duties performed, skills used or learned, advancements, or promotions, and what you liked most and least about this job. | | | |
| | | | |

| PROFESSIONAL REFERENCES | | | |
|---|-------|-------------------------|------------------|
| Provide Names Of Three Non-Relative Professional References, Whom You Have Known For At Least 1 Year. | | | |
| Name | Phone | Business / Relationship | Years Acquainted |
| | | | |
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I certify that the above information is true and correct and give authorization for investigation of all statements and information contained in this application, my resume, and other documents or verbally obtained during an employment interview. I voluntarily consent to allow the Employer or any of its designated representatives or agents to check my references by contacting any persons, company, or governmental entity they deem to be an appropriate reference. I understand these questions may pertain to my personal or educational background, work experience, character and behavior. I understand my employment is subject to satisfactory verification of this information and agree that deliberate falsification of this document or significant omissions shall be grounds for employment consideration disqualification or dismissal from employment, if discovered at a later date.

I understand that completion of this Application for Employment does not imply or guarantee employment. All employment with the Employer is at-will and as such the relationship may be terminated by either the Employer or myself, at any time, with or without notice and with or without cause. I understand that company policies, procedures, practices or statements made during an interview or employment do not create an employment contract by implication or otherwise.

This application will be active for thirty days or until the position applied for is closed. If not contacted during that period of time, it may be necessary to complete another application to receive further employment consideration.

Applicant's Signature

Date