



# Sunlight Supply, Inc.

National Garden Wholesale®

## APPLICATION FOR EMPLOYMENT

### Corporate Offices

5408 NE 88th St. Bldg. A,  
Vancouver, WA 98665

### Samoa

1900 Bendixsen St., Bldg 1  
Samoa, CA 95564

### Denver

3550 B Odessa Way  
Aurora, CO 80011

### Nashville

126 Belinda Parkway  
Mt. Juliet, TN 37122

### Fruit Valley

4525 NW Fruit Valley Rd.  
Vancouver, WA 98660

### Livermore

6485 Brisa Street  
Livermore, CA 94550

### Detroit

30811 Century Drive  
Wixom, MI 48393

### Pompano

455 S. Andrews Ave.  
Pompano Beach, FL 33069

### Woodland

1560 Downriver Drive  
Woodland, WA 98674

### Ontario

1051 S. Rockefeller Ave.,  
CA Commerce Center #2,  
Ontario, CA 91761

### York

450 Grim Lane  
York, PA 17406

### PERSONAL INFORMATION

Position Applying For:			Salary Desired:	
Name (Last)		(First)	(Middle)	
Are you employed now?				
Address		Home Telephone		
City, State, Zip Code		Alternate Telephone (please list cell or friend)		
Name of relative working for Sunlight Supply		Relationship		
Have you ever worked for Sunlight Supply?	Where?	When?	Supervisor	
Valid Current Driver's License? <input type="checkbox"/> Yes <input type="checkbox"/> No CDL License? <input type="checkbox"/> Yes <input type="checkbox"/> No				
License No: _____ State: _____ Class: _____				
Has your Driver's License ever been suspended or revoked? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If yes please explain: _____				
Have you ever been convicted, pled no contest, had adjudication withheld, or had prosecution deferred on any misdemeanor, felony, or DUI, or do you have any of these charges pending against you or are you currently enrolled in a pre-trial intervention program? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If yes, please explain fully: _____				
_____				
_____				
Note: a conviction does not necessarily prevent your application from consideration. The nature, year of your conviction, number of convictions, and the job for which you are applying are all taken into consideration. Regardless of how you answer this question, all background checks will be performed.				

OFFICE USE ONLY

Interviewed ☐ Yes ☐ No

Date Interviewed \_\_\_\_\_

## EDUCATION AND SPECIAL TRAINING

Circle highest school grade completed:      1   2   3   4   5   6   7   8   9   10   11   12

High school diploma or GED:   ☐ Yes      ☐ No

Name and address (city and state) of last high school attended: \_\_\_\_\_

### LIST SPECIAL TRAINING (BUSINESS, TRADE, VOCATIONAL, ARMED FORCES SCHOOLS, ETC.) BELOW:

Name and location of vocational school training center, institute, etc.	Dates Attended				Total Months Completed	Courses or subjects taken.	Certificates given or other pertinent information
	From		To				
	Mo.	Yr	Mo.	Yr			

### LIST COLLEGES AND UNIVERSITIES ATTENDED BELOW:

Name and location of college or university.	Dates Attended				Total Months Completed	Grade Point Average	Major/minor field or program of study	Type of degree awarded
	From		To					
	Mo.	Yr	Mo.	Yr				

## EMPLOYMENT RECORD

List the past 4 previous employers. Major changes in duties or job titles with the same employer should be listed as separate jobs. Start with the present or most recent and work back. Use blank sheets if necessary. **LEAVE NO GAPS AND BE SPECIFIC IN YOUR ANSWERS.**

Have you ever been terminated or asked to resign from any job?

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Present or Most Recent Job.** Employer: \_\_\_\_\_

Address, City, State: \_\_\_\_\_

Telephone: \_\_\_\_\_ Supervisor: \_\_\_\_\_

From: (month/yr) \_\_\_\_\_ To: (month/yr) \_\_\_\_\_ Job Title: \_\_\_\_\_

Hours per Week: \_\_\_\_\_ Starting Salary \$ \_\_\_\_\_ Per \_\_\_\_\_ Last Salary \$ \_\_\_\_\_ Per \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Duties: \_\_\_\_\_

\_\_\_\_\_

May we contact this employer for a work reference? ☐ Yes   ☐ No   If no, please explain: \_\_\_\_\_

\_\_\_\_\_

## EMPLOYMENT RECORD continued:

**Present or Most Recent Job.** Employer: \_\_\_\_\_

Address, City, State: \_\_\_\_\_

Telephone: \_\_\_\_\_ Supervisor: \_\_\_\_\_

From: (month/yr) \_\_\_\_\_ To: (month/yr) \_\_\_\_\_ Job Title: \_\_\_\_\_

Hours per Week: \_\_\_\_\_ Starting Salary \$ \_\_\_\_\_ Per \_\_\_\_\_ Last Salary \$ \_\_\_\_\_ Per \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Duties: \_\_\_\_\_

May we contact this employer for a work reference? ☐ Yes ☐ No If no, please explain: \_\_\_\_\_

**Present or Most Recent Job.** Employer: \_\_\_\_\_

Address, City, State: \_\_\_\_\_

Telephone: \_\_\_\_\_ Supervisor: \_\_\_\_\_

From: (month/yr) \_\_\_\_\_ To: (month/yr) \_\_\_\_\_ Job Title: \_\_\_\_\_

Hours per Week: \_\_\_\_\_ Starting Salary \$ \_\_\_\_\_ Per \_\_\_\_\_ Last Salary \$ \_\_\_\_\_ Per \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Duties: \_\_\_\_\_

May we contact this employer for a work reference? ☐ Yes ☐ No If no, please explain: \_\_\_\_\_

**Present or Most Recent Job.** Employer: \_\_\_\_\_

Address, City, State: \_\_\_\_\_

Telephone: \_\_\_\_\_ Supervisor: \_\_\_\_\_

From: (month/yr) \_\_\_\_\_ To: (month/yr) \_\_\_\_\_ Job Title: \_\_\_\_\_

Hours per Week: \_\_\_\_\_ Starting Salary \$ \_\_\_\_\_ Per \_\_\_\_\_ Last Salary \$ \_\_\_\_\_ Per \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Duties: \_\_\_\_\_

May we contact this employer for a work reference? ☐ Yes ☐ No If no, please explain: \_\_\_\_\_

## REFERENCES

List below the names of three persons not related to you, whom you have known at least one year.

Name	Address	Telephone	Years Known

## AUTHORIZATION

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed and all information concerning my previous employment and release the company from all liability for any damage that may result from utilization of such information.

I understand that all information on this application is subject to verification and I consent to criminal history background checks upon hire and at will thereafter while employed.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws."

I understand as a condition of employment I will be required to sign a non-compete and confidentiality agreement.

Date \_\_\_\_\_ Signature \_\_\_\_\_

Interviewed by \_\_\_\_\_ Date \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE**

## REMARKS

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Location		Supervisor	
Start Date	For Dept	Position	Salary Wages