CLIPPER TREE, INC. 7208A Weil Ave. St. Louis, MO 63119 EMPLOYMENT APPLICATION		O _I wi	Clipper Tree, Inc. ("Clipper Tree") dba Top Tree Service is an Equal Opportunity Employer. You will receive consideration for employment without regard to race, age, color, religion, sex, national origin, disability, or other category protected by law.			
		To	oday's Date:		ilable for Work:	
Position Title:		•				
How did you learn	of this position opening?					
Are you available to	o work: Full-time □ Par	t-time Temporary		Hours/Days available:		
Why are you interest	sted in the position to wh	ich you are applying				
ersonal Data						
Name (Last, First, I	M.I.):					
Current Address (N	fumber, Street, City, State	e, Zip):				
Permanent Address	(If different):					
Home Phone:	Work Phor	Work Phone:		Е	E-mail:	
Are you legally aut	horized to work in the U.	S.? No 🗆 Yes 🗆				
Offers of employment Have you ever been		sed on satisfactory contest" for a violation	ompletion of the p n of a law other tha	re-employment in minor traffic fi		
Have you ever been If yes, please explain	n asked to leave a prior jo in:	b/organization? No	□ Yes □			
	mployed at CLIPPER TF rrent employment: From		been employed at	CLIPPER TREE	? No □ Yes □	
Do you have any fa	mily members who work	for CLIPPER TREE	? No 🗆 Yes 🗆			
ducational Histor	у					
Type of School	School Name and Address	Circle Last Yea Completed	r Major	Did You Graduate		
High School		1 2 3 4				
College or Technical School		1 2 3 4				
Graduate or Other School		1 2 3 4				
	b related skills for the	e position to which	you are applyin	g		
Skills:						
Computer Skills:						

Current License / Certi	ficate (please include dates)			
Memberships in Profes	ssional Organizations (please inclu	de dates)		
mployment History	- List in chronological order, c	urrent or last employer first.	You must complete all information for all	
1. Employer Name:		Type of Business:		
Address:		Supervisor:	Phone:	
Job Title:		Dept/Area:	Hours/Week:	
Start Date:	End Date:	Salary Start:	Salary End:	
Reason for Leaving:	•		<u> </u>	
Duties:				
May we contact this en	mployer? Yes □ No □	Please Call Me First □		
2. Employer Name:		Type of Business:		
Address:		Supervisor:	Phone:	
Job Title:		Dept/Area:	Hours/Week:	
Start Date:	End Date:	Salary Start:	Salary End:	
Reason for Leaving:	•		•	
Duties:				
May we contact this en	mployer? Yes □ No □	Please Call Me First □		
3. Employer Name:		Type of Business:		
Address:		Supervisor:	Phone:	
Job Title:		Dept/Area:	Hours/Week:	
Start Date:	End Date:	Salary Start:	Salary End:	
Reason for Leaving:	•	•	•	
Duties:				
May we contact this en	nployer? Yes □ No □	Please Call Me First □		
reement				
All material received throu true to the best of my know justify immediate dismissa or reference concerning inf me. I understand that this a	vledge. I understand and agree that any rel, if hired. I hereby authorize CLIPPER formation included on this application. I	elevant and material misrepresentation TREE to contact any educational instit hereby release providers of information tent. I agree that upon separation, I wil	ot be returned. I certify that all above answers are made on this application (including resume) will ution, former employer, law enforcement agency, a from all liability in responding to inquiries about Il return to the Company property issued and/or	

Date

Signature