



Serving people with disabilities since 1970.

Please read the following before completing your application.

HOW TO APPLY:

- Complete a Garten Services Employment Application:
 - Please fill out the entire application, including all “yes”/“no” boxes.
 - **Incomplete applications will not be considered for interview**
 - Resumes may be submitted in addition to the employment application, however, please do not state “see resume” on the application form.
- Submit your application for review by one of the following methods:
 - Fax: 503-566-3434
 - Mail: Human Resources, PO Box 13970, Salem, OR 97309
 - Email: great2b@garten.org
- If selected for an interview, applicants will be asked to fill out additional forms to comply with federal regulations
- **Due to the large number of applications that Garten Services receives, it is not practical for applicants to be contacted unless they are selected for an interview**
- Under the provisions of the Immigration Reform and Control Act of 1986, any person hired or rehired is required to provide evidence of identity and eligibility for employment. Garten verifies the valid work authorization of each individual, using Form I-9 and the E-Verify Program.
- In compliance with the Americans with Disabilities Act, Garten will provide reasonable accommodation for assistance in the application process upon request made to Human Resources.
- All Garten positions require regular, prompt, and consistent attendance

EMPLOYMENT AT GARTEN SERVICES IS CONTINGENT UPON:

- Meeting minimum qualifications for the position
- Reference checking
- Passing a pre-employment drug test
- Passing a state and federal criminal history fingerprint background check

All positions require a criminal history check. Some positions require a valid Oregon driver's license, acceptable driving record, and proof of current vehicle insurance. For positions requiring a driver's license, a DMV check will be conducted to verify your driving record. If you are hired and have an out of state license, you will be required to obtain an Oregon license within 30 days of employment.

We do not use personal information in our hiring process and are dedicated to hiring the individual who is best suited for our jobs. Any personal information listed on this application or included with any supporting documentation will be removed.

Work Record

List work experience over the last 10 years, paid & unpaid, starting with your previous or most recent job.

Name of Employer: _____ Employed from _____ to _____

Street Address _____ City _____ State _____ Zip _____ Phone Number _____

May we contact?

Kind of Business _____ Job Title _____ Immediate Supervisor _____ Yes No, explain: _____

Beginning Pay Rate: _____ Ending Pay Rate: _____

Job Duties: _____

What did you like about this job?: _____

Reason(s) for leaving: _____

Name of Employer: _____ Employed from _____ to _____

Street Address _____ City _____ State _____ Zip _____ Phone Number _____

May we contact?

Kind of Business _____ Job Title _____ Immediate Supervisor _____ Yes No, explain: _____

Beginning Pay Rate: _____ Ending Pay Rate: _____

Job Duties: _____

What did you like about this job?: _____

Reason(s) for leaving: _____

Name of Employer: _____ Employed from _____ to _____

Street Address _____ City _____ State _____ Zip _____ Phone Number _____

May we contact?

Kind of Business _____ Job Title _____ Immediate Supervisor _____ Yes No, explain: _____

Beginning Pay Rate: _____ Ending Pay Rate: _____

Job Duties: _____

What did you like about this job?: _____

Reason(s) for leaving: _____

Name of Employer: _____ Employed from _____ to _____

Street Address _____ City _____ State _____ Zip _____ Phone Number _____

May we contact?

Kind of Business _____ Job Title _____ Immediate Supervisor _____ Yes No, explain: _____

Beginning Pay Rate: _____ Ending Pay Rate: _____

Job Duties: _____

What did you like about this job?: _____

Reason(s) for leaving: _____

References

List three people not related to you who know your work history

Name _____ Occupation _____ Relationship _____ Years Known _____ Phone Number _____

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Additional Questions

The following information is requested only to help match your skills with positions which may be available and to provide reasonable accommodation where appropriate.

Are you able to perform the primary duties of the job applied for (as outlined in the newspaper ad/posting notice/job description, etc.) with or without an accommodation? Yes No

Please read the following statements carefully before signing this application. Only those applications that are signed and dated are considered valid. If you have any questions regarding any statement, please ask them before signing.

- I certify that all answers and statements I have made on this application (and resume or other supplementary materials) are true and complete without omissions. I understand that any false information will be grounds for refusal to hire or for immediate discharge if I am employed. I authorize any of the persons or organizations having personal knowledge about me to give you any and all information and records regarding my employment, education, character and qualifications. I release from liability and hold harmless all persons and organizations supplying this information to Garten Services and/or its agents. Yes No
- I understand that Garten Services is a drug-free workplace and that my employment is subject to the satisfactory results of a mandatory chemical screen test and any other pre-employment examination required by Garten. I agree to conform to all rules and regulations of Garten as they presently exist or are later modified. Yes No
- I understand that my employment at Garten Services is subject to the satisfactory results of a mandatory background check as required by the Oregon Department of Human Services. Yes No
- I understand that my employment at Garten is offered "at will" and is of indefinite duration and that my employment can be terminated, at the discretion of Garten Services or at my option, without notice, at any time. Yes No
- I understand that no representative of Garten Services has any authority to enter into any employment agreement for any specified period of time, or to assure me of any future position, benefits, or terms and conditions of employment. No agreement to the contrary will be recognized by Garten unless such agreement is in writing and signed by the CEO. Yes No
- I understand that interviews are given on a competitive basis, using job-related factors after a written application has been received and reviewed. Because of the large number of applications received, not everyone who applies for a vacant position will be interviewed. Yes No

I have read, understand and agree with the above.

Applicant Signature

Date

Note: An applicant's signature on this statement is a requirement of the application process. No further consideration will be given to any application submitted without a signature. Electronic signatures accepted but not preferred. This application is valid for 60 days from the date received. If you wish to be considered for job openings that become available after your application has been on file for 60 days, please submit a new application.



Serving people with disabilities since 1970.

Garten Services, Inc. is an equal opportunity employer. It is the policy of Garten Services, Inc. to actively recruit and hire qualified applicants, regardless of race, color, religion, national origin, sex, age, sexual orientation, gender identity or expression, marital status, political affiliation or belief, protected veteran status, or physical or mental disability or association with any of these protected classes in accordance with applicable law.

To monitor our progress in meeting equal opportunity goals, the following information is requested from all applicants. It is requested solely for the purpose of determining compliance with government regulations and affirmative action responsibilities. Your response will be kept in a file separate from the application for employment.

Position applying for: _____ Date: _____

Last Name First Name Middle Name

Gender: [] Male [] Female Date of Birth: _____

Race/Ethnicity: The racial and ethnic categories for Federal statistics and administrative report are defined as follows.

- [] Hispanic or Latino: a person of Cuban, Mexican, Puerto Rican, Central or South American, or other Spanish culture of origin, regardless of race.
[] White (not Hispanic or Latino): a person having origins in any of the original peoples of Europe, North Africa or the Middle East.
[] Black or African American (not Hispanic or Latino): a person having origins in any of the black racial groups of Africa.
[] Hawaiian or Other Pacific Islander (not Hispanic or Latino): a person having origins in any of the peoples of Hawaii, Guam, Samoa or other Pacific Islands.
[] Asian (not Hispanic or Latino): a person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, including Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.
[] American Indian or Alaskan Native (not Hispanic or Latino): a person having origins in any of the original peoples of North and South America (including Central America) and who maintains cultural identification through tribal affiliation or community recognition.
[] Two or More Races (not Hispanic or Latino): All persons who identify with more than one of the above five races.

Veteran Status: [] Yes (Please indicate category, below) [] No

- [] Armed Forces Service Medal Veteran
[] Recently-Separated Veteran (within 36 months of discharge or release from active duty)
[] Disabled Veteran
[] Other Protected Veteran (those who served in active duty during a war, in a campaign or expedition for which a campaign badge is awarded)

Referral Source

- [] Employment Department
[] Garten Website
[] Garten Employee Referral
[] Temporary Staffing Agency
[] Other, Website: _____