

**PLEASE NOTE: INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED**

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

Email Address: \_\_\_\_\_

Present Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_ Telephone: \_\_\_\_\_

How long? \_\_\_\_\_

*If less than 5 years list all previous addresses for past 5 years (use another sheet or back of this page if more than 2):*

1. Address : \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

2. Address : \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Are you 18 years old or older?----- Yes No

Are you either a U.S. citizen or an alien authorized to work in the U.S.?----- Yes No

Have you ever worked or attended school under another name?----- Yes No

If Yes, under what name? \_\_\_\_\_ Social Security # (last 4 only) \_\_\_\_\_

**POSITION: PEST CONTROL SERVICE TECHNICIAN**

Date you can start: \_\_\_\_\_

Hours available to work: \_\_\_\_\_ Days of week available to work: \_\_\_\_\_

Have you previously worked for Hawkeye Pest Control, Inc.?----- Yes No

If so, from \_\_\_\_\_ to \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

Former supervisor(s) at this company: \_\_\_\_\_

How did you learn about this opening? \_\_\_\_\_

**EDUCATION**

High School: \_\_\_\_\_ Graduated?----- Yes / Year \_\_\_\_\_ No \_\_\_\_

Technical School: \_\_\_\_\_ Graduated?----- Yes / Year \_\_\_\_\_ No \_\_\_\_

Course of Study: \_\_\_\_\_

College/University: \_\_\_\_\_ Graduated?----- Yes / Year \_\_\_\_\_ No \_\_\_\_

Course of Study: \_\_\_\_\_

Other education or training: \_\_\_\_\_ Other special skills: \_\_\_\_\_

**HAWKEYE PEST CONTROL - Employment Application**

**MILITARY EXPERIENCE**

Branch of Service: \_\_\_\_\_ Dates Served: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Education and Training: \_\_\_\_\_

Have you ever been arrested ?\* \_\_\_Yes \_\_\_No. Have you ever been convicted of a crime?\* \_\_\_Yes \_\_\_No.  
If yes, give details, including date(s): \*A "yes" answer will not automatically disqualify you from employment. We will consider the nature and date of the offense and the job for which you are applying for job-related purposes only, and only to the extent permitted by law.

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**WORK EXPERIENCE - Please list all previous employment, beginning with the most recent.**

*If less than 10 years list all previous employers for past 10 years (use another sheet or back of this page if more than 3):*

1. Employer: \_\_\_\_\_ Telephone: \_\_\_\_\_

Street Address & City / State: \_\_\_\_\_

From \_\_\_\_\_ to \_\_\_\_\_ Position Held: \_\_\_\_\_

Supervisor's Name & Title: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

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Description of Duties: \_\_\_\_\_

Starting Hourly/Monthly Pay: \_\_\_\_\_ Final Hourly/Monthly Pay: \_\_\_\_\_

2. Employer: \_\_\_\_\_ Telephone: \_\_\_\_\_

Street Address & City / State: \_\_\_\_\_

From \_\_\_\_\_ to \_\_\_\_\_ Position Held: \_\_\_\_\_

Supervisor's Name & Title: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

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Description of Duties: \_\_\_\_\_

Starting Hourly/Monthly Pay: \_\_\_\_\_ Final Hourly/Monthly Pay: \_\_\_\_\_

3. Employer: \_\_\_\_\_ Telephone: \_\_\_\_\_

Street Address & City / State: \_\_\_\_\_

From \_\_\_\_\_ to \_\_\_\_\_ Position Held: \_\_\_\_\_

Supervisor's Name & Title: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

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Description of Duties: \_\_\_\_\_

**HAWKEYE PEST CONTROL - Employment Application**

Starting Hourly/Monthly Pay: \_\_\_\_\_ Final Hourly/Monthly Pay: \_\_\_\_\_

Compensation: _____	__Check here if currently not employed
Current Hourly \$ _____ OR Salary \$ _____	Check one: __ Weekly __ Monthly
Please indicate salary requirements if any: Hourly \$ _____ OR Weekly Salary \$ _____	

All prospective employees must undergo a Driver's License Records Check and a Criminal Background Check. By filling out the following information you authorize Hawkeye Pest Control to request your records from the appropriate authorities and / or agencies.

**\*\*NOTE: AT LEAST 1 YEAR FLORIDA DRIVERS LICENSE REQUIRED FOR CONSIDERATION \*\***

Current Drivers License #: \_\_\_\_\_ State issued: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

If you have had current license for less than 2 years List Previous Drivers License#:

Previous Drivers License #: \_\_\_\_\_ State issued: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Have you ever received any traffic or vehicle citations? \_\_Yes \_\_No.

**AUTHORIZATION AND ACKNOWLEDGMENTS:** I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that if I am employed, any false statements on this application may be grounds for dismissal. I authorize investigation of all statements contained in this application. I also grant permission to contact all references listed above, and authorize them to release all information concerning my previous employment and any other pertinent information these references might have, personal or otherwise. I release all parties from all liability for any damage that may result from furnishing this information to you. I understand and agree that, if hired, my employment is for no definite period and may be terminated at any time and without prior notice.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## HAWKEYE PEST CONTROL - Employment Application

**Job Title:** Pest Control Technician

**Supervisor:** Obie Munoz

**Job Summary / Responsibilities:** Providing pest control services to clients. Identify and solve pest control issues with appropriate treatments. Problem solve. Communicate and educate all customers on products, treatments, pest control programs & preventive measures. Keep your vehicle washed, cleaned inside and organized, daily. Other duties as assigned. This position reports directly to owners / upper management and or designated staff.

**Job Tasks:** Driving, lifting, bending, written / verbal communication with clients, applying pesticides, walking, spending extended time outside in hot / cold environments, need pest control knowledge, including but not limited to pesticide safety, insect behaviors and biology, equipment usage, client care skills, and various other related skills.

**Physical Strength:** Must be able to lift objects up to 100 lbs. to move heavy items or equipment, carry equipment (up to 40 lbs.) such as back-pack sprayers for extended periods of time. Able to bend, squat, and reach. These activities could average 4 hours per day or more.

**Endurance/Environment:** This position requires time spent standing, sitting, bending, walking and kneeling. This will vary by type of clients assigned for the day but could be the entire 8 hour shift. Must be able to get on hands and knees to reach under various types of equipment and inspect / treat for pests. Must be able to tolerate outside temperatures in Florida heat / cold for extended periods of time up to 8 hours per day. Must be able to work in all seasonal weather conditions, damp & dusty locations. Able to fit through 2' x 2' openings, traverse over and under obstacles in crawlspaces and attics, climb over and on top of structures and ascend and descend stairs. Must be able to use ladders, power tools, hand tools and personal protective equipment.

**Ability:** High School education or equivalent. Ability to utilize problem-solving skills, communication & time management skills. Good driving record, provide 5 year abstract. Able to read and write in English legibly, comprehend pesticide labels, & have strong written and verbal skills. Must have minimum 1 year verifiable experience with a Florida pest control company. Must be able to pass company technical competency test.

**Vision / Hearing:** Must be able to pass vision requirements to obtain state drivers license and be able to read pesticide label instructions. Must be able to hear clients for communication purposes and traffic for safety reasons.

**Other:** Must have pleasing / professional appearance to clients. Not have chemical sensitivities that would prohibit working with pesticides.

*I the undersigned employee / applicant verify that I have read the above job description and am able and willing to perform all job functions listed.*

Employee / Applicant signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_