



**SOUSA'S**

**LANDSCAPE MANAGEMENT CO. LTD.**

LANDSCAPE ARCHITECTURE - DESIGN / BUILD - IRRIGATION - HORTICULTURAL MAINTENANCE

## JOB APPLICATION FORM

PLEASE NOTE: This form must be filled out **IN FULL** and returned to the offices of Sousa's Landscape Management Co. Ltd., along with all documentation as requested. **INCOMPLETE applications will not be accepted.**

Name of Applicant: \_\_\_\_\_

Position Applying for: \_\_\_\_\_

**MAILING** Address: \_\_\_\_\_

**PHYSICAL** Address: \_\_\_\_\_

Contact Numbers: \_\_\_\_\_ Home \_\_\_\_\_ Cell \_\_\_\_\_

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

Date of Birth: \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

Social Insurance Number: \_\_\_\_\_

Nationality: \_\_\_\_\_

**\*If a Bermudian, you MUST SUPPLY A COPY OF YOUR PROOF OF STATUS.** This application will NOT be accepted without this document.

**\*\*If married to a Bermudian, you MUST SUPPLY A COPY OF YOUR MARRIAGE CERTIFICATE AND A COPY OF A LETTER FROM IMMIGRATION STATING YOUR RIGHT TO WORK IN BERMUDA.** This application will NOT be accepted without this document.

Marital Status: Single (  ) Married (  ) Divorced (  ) Number of Children: \_\_\_\_\_

Driving Record: Please list CLEAN drivers licenses you currently hold (i.e. bike, car, truck, etc.)

1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

Have you ever been convicted in a court of law on any criminal or civil proceedings? Yes (  ) No (  )

If the answer is yes:

When? \_\_\_\_\_

Where? \_\_\_\_\_

Nature of Offence \_\_\_\_\_

Sentence \_\_\_\_\_

Comments \_\_\_\_\_

**List last three (3) places of employment (inclusive of current employer) and the contact person whom we may contact as referees. Failure to complete this section will result in this application becoming void.**

**#1**

Name of Business \_\_\_\_\_

Contact Name \_\_\_\_\_ Tel \_\_\_\_\_

Dates of Employment \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_

Position Held \_\_\_\_\_

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

**#2**

Name of Business \_\_\_\_\_

Contact Name \_\_\_\_\_ Tel \_\_\_\_\_

Dates of Employment \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_

Position Held \_\_\_\_\_

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

**#3**

Name of Business \_\_\_\_\_

Contact Name \_\_\_\_\_ Tel \_\_\_\_\_

Dates of Employment \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_

Position Held \_\_\_\_\_

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

List Places of Education

1 \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_

2 \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_

3 \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_

List Certificates/Diplomas Obtained

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**PLEASE ATTACH COPIES OF CERTIFICATES/DIPLOMAS TO THIS APPLICATION**

Character References

#1 Name \_\_\_\_\_

Contact Number(s) \_\_\_\_\_

#2 Name \_\_\_\_\_

Contact Number(s) \_\_\_\_\_

List any special skills, qualifications, etc, that would further qualify you for the position for which you are applying:

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**PLEASE ATTACH A CURRENT RESUME WITH THIS APPLICATION.**

**\*\*\*ARE THERE ANY MEDICAL ISSUES/CONDITIONS THAT YOU HAVE THAT WE SHOULD BE AWARE OF? IF SO, PLEASE SPECIFY BELOW:**

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Signature of Applicant \_\_\_\_\_

Date of Application \_\_\_\_\_

**REMINDER**

**Please be advised that failure to complete this application IN FULL will result in the application becoming void. Sousa's Landscape Management Co. Ltd. will not be responsible for failure to comply with its application policies. Copies of any certificates, etc., are to be submitted with this application.**

**OFFICE USE ONLY**

References Checked by: \_\_\_\_\_

Date(s) References Checked: \_\_\_\_\_

Comments: \_\_\_\_\_

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