



401-525-8633

Serving Rhode Island & Southeastern Massachusetts
RI Licensed Arborist #1206

Employment Application

Welcome to Scally's Tree Service LLC. Please complete, sign, date, and return this application to

EMPLOYEE DETAILS

First & Last Name

Cell Phone

Email Address

Mailing Address

JOB EXPERIENCE

1. Company

Start Date

End Date

Start Pay

End Pay

Job Title

Supervisor

Phone Number

2. Company

Start Date

End Date

Start Pay

End Pay

Job Title

Supervisor

Phone Number

3. Company

Start Date

End Date

Start Pay

End Pay

Job Title

Supervisor

Phone Number

CERTIFICATIONS & EXPERIENCE

Attach copies of all current certifications. For emailed attachments, enter the file name in the field provided.

Certification	Completed?	Expiration Date	Certification or License Number
OSHA 10/30		N/A	
CPR / FIRST AID			
AERIAL LIFT CERTIFICATION			
CHAINSAW SAFETY			
CDL CLASS			

EQUIPMENT & SKILLS

Tell us about your level of experience with each category listed below.

Chainsaw Operation 	Climbing w/ Saddle & Rope 	Bucket Truck Operation
Chipper Operation 	Stump Grinder 	Tree Removal
Pruning & Trimming 	Rigging / Roping 	Ground Crew Experience

OTHER RELEVANT SKILLS

Other Skills

Acknowledgement & Signatures

ACKNOWLEDGEMENT

I certify that the information provided above is true and complete to the best of my knowledge. I understand that any false or misleading information may result in termination should I be hired.

Signature

Date

Signature fields may be typed, or completed with your PDF viewer's signature tool.