



Application for Employment  
(Pre-employment questionnaire) (An equal opportunity employer)

General Information:

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_-\_\_\_\_ Email \_\_\_\_\_

Are you a United States citizen or approved to work in the United States?      Yes      No



Hours interested in \_\_\_\_\_

- Full Time
- Part time

Desired pay rate \$\_\_\_\_\_

Have you been convicted of a non-violent felony within the past 2 years or a violent felony within the past 5 years? Yes / No

If yes, please explain \_\_\_\_\_

When is your desired start date? \_\_\_\_\_

Are you willing to work without your cell phone?    Yes    No

Are you willing to perform duties such as cleaning, sweeping, etc?    Yes    No

Are you able to lift items up to 20 lbs?    Yes    No

May we contact your references and former employers?    Yes    No

What interests you about the medical cannabis industry?



What interests you about our company?

Please list the skills and qualifications you possess for the position you are applying for. What would your former employers and colleagues say about you?

Tell us about a time where you had to resolve a conflict with a colleague or customer. What caused the conflict and what steps did you take to resolve the situation?



Education:

High School:

Name \_\_\_\_\_ Location (City, State) \_\_\_\_\_

Year Graduated \_\_\_\_\_ GPA \_\_\_\_\_

College/University:

Name \_\_\_\_\_ Location (City, State) \_\_\_\_\_

Year Graduated \_\_\_\_\_

Degree Earned \_\_\_\_\_ GPA \_\_\_\_\_

Vocational School/Specialized Training:

Name \_\_\_\_\_ Location (City, State) \_\_\_\_\_

Year Graduated \_\_\_\_\_

Degree Earned \_\_\_\_\_ GPA \_\_\_\_\_



Experience:

Company name \_\_\_\_\_ Supervisor \_\_\_\_\_

Address/City/State \_\_\_\_\_

Phone \_\_\_\_\_ Dates of employment \_\_\_\_/\_\_\_\_/\_\_\_\_ List your  
duties \_\_\_\_\_

Reasons for leaving \_\_\_\_\_

Company name \_\_\_\_\_ Supervisor \_\_\_\_\_

Address/City/State \_\_\_\_\_

Phone \_\_\_\_\_ Dates of employment \_\_\_\_/\_\_\_\_/\_\_\_\_ List your  
duties \_\_\_\_\_

Reasons for leaving \_\_\_\_\_

Business References:

Name \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_



I understand this application does not create an “implied contract” and that in the event of hiring, employment is “at will” can be terminated for any or no reason. I hereby certify the above information is true and complete.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Signature Application Date

### \*UPON COMPLETION

Save the file with your first and last name followed by Mosaic.Application  
(Example: Jane Doe Mosaic.Application.pdf)

After saving your application email your file to [Tiffany@mosaicdispensary.com](mailto:Tiffany@mosaicdispensary.com)