



# APPLICATION FOR EMPLOYMENT

## PERSONAL INFORMATION

Name: \_\_\_\_\_  
(Last) (First) (Middle)

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Social Security No: \_\_\_\_\_

Driver's License:  Yes  No Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

Are you a citizen of The United States?  Yes  No - Are you authorized to work in The United States?  Yes  No

## JOB INTEREST AND SKILLS

Position(s) applied for: \_\_\_\_\_ Rate Desired: \_\_\_\_\_

Have you applied or worked here before? :  Yes  No If yes, when? \_\_\_\_\_

Painters Only: What level do you feel best suited for?  Foreman  Journeyman Painter  Apprentice Painter

Are you willing to work nights, weekends or "out of town"? :  Yes  No

Have you ever been injured on a job?  Yes  No If yes, describe: \_\_\_\_\_

### List your last two (2) employers

1. Company: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Telephone: \_\_\_\_\_ Supervisor: \_\_\_\_\_

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

Duties: \_\_\_\_\_

2. Company: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Telephone: \_\_\_\_\_ Supervisor: \_\_\_\_\_

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

Duties: \_\_\_\_\_

## SIGNATURE

I certify the information on this application is correct to the best of my knowledge and any misrepresentation(s) on this application is grounds for disqualification of the applicable position.

\_\_\_\_\_  
 SIGNATURE OF APPLICANT

\_\_\_\_\_  
 DATE