

# RAY THE PAINTER EMPLOYMENT APPLICATION

Please fill out application completely. Please print legibly.

Date: / /

## ■ APPLICANT DATA:

Full name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Cell/Other Phone: \_\_\_\_\_  
 Date available to start: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
 Position you are applying for: \_\_\_\_\_ Salary required: \_\_\_\_\_  
 Have you ever worked for this company?  Yes  No If yes, when? \_\_\_\_\_  
 Are you a citizen of the United States  Yes  No If not, are you legally allowed to work in the U.S.?  Yes  No  
 Type of employment desired:  Full time  Part time  Temporary  Seasonal  
 Have you ever pled "guilty," "no contest," or been convicted of a crime?  Yes  No  
 If yes, please give dates and details: \_\_\_\_\_

*Answering "yes" to these questions does not constitute an automatic rejection for employment. Date of offense, seriousness and nature of the violation, rehabilitation, and position applied for will be considered.*

Driver's License#: \_\_\_\_\_ State: \_\_\_\_\_ Type of Vehicle: \_\_\_\_\_  
 Who referred you to us? \_\_\_\_\_

## ■ EDUCATION:

High School: \_\_\_\_\_ City/State: \_\_\_\_\_  
 # of years completed: \_\_\_\_\_ Did you graduate?  Yes  No  
 College/University/Trade School: \_\_\_\_\_ City/State: \_\_\_\_\_  
 # of years completed: \_\_\_\_\_ Did you graduate?  Yes  No Degree: \_\_\_\_\_

## ■ PERSONAL REFERENCES:

*Please provide the names, addresses and telephone numbers of two people who are not related to you and that you have never worked for in the past. References should be individuals we can call, and who know how to contact you.*

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_  
 Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

## ■ SKILLS AND QUALIFICATIONS:

	Level of experience			# Years Experience
	none	average	pro	
Painting (Brush and Roll)				
Painting Airless Exterior				
Airless Wood Finishing				
Faux Finishes				
Staining Wood				
Glazing Wood				
Glazing Windows				
Drywall Install				
Drywall Patching				
Drywall Finishing				
Drywall Texture				
Matching Texture				
Handling Tall Ladders				
Carpentry				
Wall Paper				
Back Filling				

*Please list any additional skills or qualifications in the space below:*

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**■ PREVIOUS EMPLOYMENT (begin with most recent position):**

Dates of Employment: From \_\_\_/\_\_\_/\_\_\_ To \_\_\_/\_\_\_/\_\_\_ Position held: \_\_\_\_\_

Business Name: \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Job Responsibilities: \_\_\_\_\_

Starting salary and title: \_\_\_\_\_

Ending salary and title: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

May we contact this employer for a reference?  Yes  No

Dates of Employment From \_\_\_/\_\_\_/\_\_\_ To \_\_\_/\_\_\_/\_\_\_ Position held: \_\_\_\_\_

Business Name: \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Job Responsibilities: \_\_\_\_\_

Starting salary and title: \_\_\_\_\_

Ending salary and title: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

May we contact this employer for a reference?  Yes  No

Dates of Employment: From \_\_\_/\_\_\_/\_\_\_ To \_\_\_/\_\_\_/\_\_\_ Position held: \_\_\_\_\_

Business Name: \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Job Responsibilities \_\_\_\_\_

Starting salary and title: \_\_\_\_\_

Ending salary and title: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

May we contact this employer for a reference?  Yes  No

***I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, educational, financial, or medical history and other related matters as may be necessary for an employment decision. I hereby release employers, schools or persons from all liability when responding to inquiries in connection with my application.***

***In the event I am employed, I understand that false and misleading information given in my application or interview(s) may result in discharge.***

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