



EMPLOYMENT APPLICATION

FAX: 937-322-7495

Applications are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or in the presence of a non-related medical condition or handicap.

Name _____ Date _____

Address _____ Phone # _____

City _____ State _____ Zip _____ Social Security # _____

DOB _____ Are you a citizen of the United States of America? [] Yes [] No

Have you ever used another name, AKA, or alias? No if Yes _____

Have you applied here before? Yes No When? _____ Position applied for? _____

Start When _____ Full time Part time Temporary Other _____

Have you ever been convicted of a crime? Yes No

If yes, explain:

EMPLOYMENT EXPERIENCE; Start with your present job or last job. Include military assignments and other volunteer activities. Exclude organizational names which indicate race, color, religion, sex, or national origin

Employer 1 _____

Address _____ City _____ State _____ Zip _____

Phone # _____ Supervisors' Name _____

Job Title _____ Reason for leaving _____

Dates of Employment: From _____ To _____ Salary or Hourly rate _____

Employer 2 _____

Address _____ City _____ State _____ Zip _____

Phone # _____ Supervisors' Name _____

Job Title _____ Reason for leaving _____

Dates of Employment: From _____ To _____ Salary or Hourly rate _____

APPLICATION PART 2

Employer 3 _____

Address _____ City _____ State _____ Zip _____

Phone # _____ Supervisors' Name _____

Job Title _____ Reason for leaving _____

Dates of Employment: From _____ To _____ Salary or Hourly rate _____

EDUCATION

Schools/Collages Attended: # Years Year Grad. Degree

Describe any special qualifications for this job:

Drivers License # _____ **State** _____ **Expiration** _____

Are you a veteran of the U.S. Military service? Yes No

I CERTIFY that answers given herein are true and complete to the best of my knowledge. I authorize investigations of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand that this application is not intended to be a contract of employment. In the event of employment, I understand that false or misleading information given on my application or interview may result in termination.

Signature _____ Date _____

When you have completed this application please fax it back to U.S. Pro Painters. Thank you.

For Personnel Department only

Remarks _____

Interview report by _____