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| **Applicant Information:** |
| Position Applying for: |  | Date of Application: |  |
| Name: |
| Address: | First | Middle | Last |  |
|  |  |
| Phone: | Street Address | PO Box/Apt # | City | State | Zip Code |
| Email: |  |

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| Type of Employment Desired: Full Time |  | Part Time |  | Temporary |
| If hired, what date are you able to start? |  |  |  |  |
| Are you legally eligible to be employed in the United States?*(Proof of identity and eligibility will be required upon employment.)* |  | Yes |  | No |
| Are you over the age of 18 years?*(If no, you may be required to provide authorization to work.)* |  | Yes |  | No |
| Have you ever been convicted of a felony? |  | Yes |  | No |
|  If yes, please explain: |  |  |  |  |

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| **Employment:**Start with your current or most recent position. |
| Name of Employer: |  | Job Title:Phone: |  |
| Address: |  |  |
| Supervisor Name and Title: |  |  |
| Dates Employed: |  | Salary: |  |
| Describe the Work Performed: |  |
|  |  |
|  |
| Reason for Leaving: |  |

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| Name of Employer: |  | Job Title:Phone: |  |
| Address: |  |  |
| Supervisor Name and Title: |  |  |
| Dates Employed: |  | Salary: |  |
| Describe the Work Performed: |  |
|  |  |
|  |
| Reason for Leaving: |  |
| Name of Employer: |  | Job Title:Phone: |  |
| Address: |  |  |
| Supervisor Name and Title: |  |  |
| Dates Employed: |  | Salary: |  |
| Describe the Work Performed: |  |
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| Reason for Leaving: |  |

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| --- | --- | --- | --- |
| Name of Employer: |  | Job Title:Phone: |  |
| Address: |  |  |
| Supervisor Name and Title: |  |  |
| Dates Employed: |  | Salary: |  |
| Describe the Work Performed: |  |
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|  |
| Reason for Leaving: |  |

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| **Education:** |
|  | Name of School | Course of Study | No. of Years Completed | Diploma/Degree |
| High School |  |  |  |  |
| College |  |  |  |  |
| Vocational or Trade |  |  |  |  |
| Graduate |  |  |  |  |
| Other |  |

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| Rate your experience level in the following paint fields: |
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| --- | --- | --- | --- | --- | --- |
|  | No experience | Beginner | Intermediate | Advanced | Expert |
| Residential |  |  |  |  |  |
| Commercial |  |  |  |  |  |
| Industrial |  |  |  |  |  |
| Estimating |  |  |  |  |  |
| Paper Hanging |  |  |  |  |  |
| Spray |  |  |  |  |  |
| Roller |  |  |  |  |  |
| Climbing ladders (up to 40 ft.) |  |  |  |  |  |
| Carrying ladders(up to 40 ft.) |  |  |  |  |  |

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|  | **References:**List at least 2 professional and 1 unrelated personal reference. |
| Name | Phone |  | Years Known | Relationship |
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| **Acknowledgement:** |
| * I understand and agree that any misrepresentation by me on this application will be sufficient cause for

cancellation of this application and/or termination from this employer’s service.* I give TSB Painting LLC the right to investigate all references and to secure additional information about me, if job-related. I hereby release from liability TSB Painting LLC and its representatives for seeking such information and other persons, corporations or organizations for furnishing such information.
* TSB Painting LLC is an equal opportunity employer and all qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability status, protected veteran status, or any other characteristic protected by law.
* I understand that it is TSB Painting LLC policy not to refuse to hire a qualified individual with a disability because of the applicant’s need for an accommodation as required by the Americans with Disabilities Act.
* This application is valid for 60 days. At the conclusion of 60 days, if TSB Painting LLC has not indicated otherwise, it will be necessary for the applicant to complete a new application.
* I understand that I am free to resign at any time and TSB Painting LLC reserves the right to terminate my employment with or without cause and without prior notice. I understand that no representative of the employer has the authority to make assurances to the contrary.
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| Applicant Signature: |  | Date: |  |