

# **TOM'S**

**BODY & PAINT INC.**

**APPLICATION**

**FOR**

**EMPLOYMENT**

*An Equal Employment Opportunity Employer*

# PERSONAL INFORMATION

Today's Date \_\_\_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Current Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

Cell Phone (        ) \_\_\_\_\_ Work Phone (        ) \_\_\_\_\_

May we call you at work?        YES        NO

Position Applying for \_\_\_\_\_ What is your salary Requirement? \_\_\_\_\_

Will you accept:     Full Time         Part Time         Temporary         On-Call         Weekends

What date will you be available to start employment? \_\_\_\_\_

How did you find out about this position?     Social Media         [indeed.com](http://indeed.com)         Craigslist         Our Website  
 Other: \_\_\_\_\_

Do you speak, read or write in any languages other than English fluently?

Speak: \_\_\_\_\_ Read: \_\_\_\_\_ Write: \_\_\_\_\_

**CHECK "YES" OR "NO" TO EACH OF THE FOLLOWING QUESTIONS. EXPLAIN WHEN NECESSARY.**

**YES NO**

1.   Are you over 18 years of Age? (If no, a work permit or proof of emancipation will be required.)
2.   Do you have a Valid California Drivers License? (having a drivers license is necessary only if driving is required as part of the position being applied for.)

**DRIVER'S LICENSE**

**Type State Number Date Issued Expiration Date**

Type	State	Number	Date Issued	Expiration Date

3.   Can you provide proof after you are hired that you can legally work in the United States?

***EDUCATION / TRAINING / CERTIFICATES***

1. Name and location of schools (High school, college, trade, business or correspondence). Include trade school, vocational, military, etc.

Special Training/ Certificates: List any training you have had which may help to qualify you for the position. For example; typing , software certificates, professional registration.

**Name Location Graduate? Subject Studied Degree**

Name	Location	Graduate?	Subject Studied	Degree

**CERTIFICATES**

**Certificate Location Subject Studied**

Certificate	Location	Subject Studied

# EMPLOYMENT HISTORY

## Dates of Work

From: \_\_\_\_\_  
Month Year

To: \_\_\_\_\_  
Month Year

### Type of Employment:

Full-Time  Part-Time

Hrs. Per Week \_\_\_\_\_

### May We Contact This Employer?

Yes  No

Employer's Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Title \_\_\_\_\_

Your Title \_\_\_\_\_

Describe Your Duties \_\_\_\_\_

\_\_\_\_\_

Reason For Leaving \_\_\_\_\_

## Dates of Work

From: \_\_\_\_\_  
Month Year

To: \_\_\_\_\_  
Month Year

### Type of Employment:

Full-Time  Part-Time

Hrs. Per Week \_\_\_\_\_

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Supervisor's Name \_\_\_\_\_ Title \_\_\_\_\_

Your Title \_\_\_\_\_

Describe Your Duties \_\_\_\_\_

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Reason For Leaving \_\_\_\_\_

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Employer's Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Title \_\_\_\_\_

Your Title \_\_\_\_\_

Describe Your Duties \_\_\_\_\_

\_\_\_\_\_

Reason For Leaving \_\_\_\_\_

# **REFERENCES**

<b>Name</b>	<b>Phone</b>	<b>Relationship</b>	<b>E-Mail</b>

**PLEASE READ CAREFULLY AND INITIAL  
EACH PARAGRAPH BEFORE SIGNING**

I have disclosed all information that is relevant and should be considered applicable to my candidacy for employment.

\_\_\_\_\_  
Initials

I understand, where permissible under applicable law, I may be subject to a pre-employment drug screening after receiving a conditional offer of employment, and must successfully pass a drug screening before being permitted to commence work with the Company.

\_\_\_\_\_  
Initial

I understand, where permissible under applicable law, I may be subject to a medical examination after receiving a conditional offer of employment, and must meet the qualifications for the position, with or without reasonable accommodation, before being permitted to commence work with the Company.

\_\_\_\_\_  
Initial

I authorize the Company and its representatives to contact my prior employers and all others for the purpose of verification of the information I have supplied and release same from any liability resulting from the information released. I authorize employers, schools, and other persons named on this application to provide any information or transcripts requested.

\_\_\_\_\_  
Initial

I understand employment with the Company is contingent on my providing sufficient documentation necessary to establish my identity and eligibility to work in the United States.

\_\_\_\_\_  
Initial

I expressly understand and agree that either the Company or I may terminate my employment relationship with the Company at any time, with or without cause or notice.

\_\_\_\_\_  
Initial

I understand that no representation, whether oral or written, by any representative or agent of the Company, at any time, can constitute an implied or expressed contract of employment. I further understand no representative or agent of the Company has the authority to enter into an agreement for employment for any specified period of time or to make any change in any policy, procedure, benefit, or other terms or condition of employment other than in a document signed by the President of the company or his/her authorized representative.

\_\_\_\_\_  
Initial

I certify that all of the above information is true and complete, and I understand that any falsification or material omission of information may result in denial of employment or, if hired, may result in termination regardless of the time lapse before discovery.

\_\_\_\_\_  
Initial

MY SIGNATURE IS EVIDENCE I HAVE READ AND AGREE WITH THE ABOVE STATEMENTS.

**Applicant's signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**Applications will be maintained in accordance with applicable laws.**

*We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, sexual orientation, marital or veteran status, physical or mental disabilities, or any other legally protected status.*