



# Employment Application

## Applicant Information

Name:

\_\_\_\_\_

(Last) (First) (Middle Initial)

Address:

\_\_\_\_\_

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

Phone: \_\_\_\_\_ (Home) \_\_\_\_\_ (Cell)

Position Applied For: \_\_\_\_\_

Do you have prior painting experience?  Yes  No

Painting Experience:(Check all that apply)  Commercial  Residential

If Yes, Please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Questionnaire:

1. Have you ever worked for Aaron's Painting, Inc. before?  Yes  No  
a. If Yes, what date(s) did you previously work for us

\_\_\_\_\_

2. Are you currently Employed?  Yes  No

3. May we contact your present employer?  Yes  No

4. Are you prevented from lawfully becoming employed  
In this country due to Visa or Immigration Status?  Yes  No
5. Check your availability to work  Full Time  Part Time  Temporary
6. Shifts Willing to Work: (Check all that Apply)  
 First Shift  Second Shift  Third Shift
7. Date you can begin work: \_\_\_\_\_
8. Have you been convicted of a felony within the past seven  Yes  No  
(7) years?  
If Yes, Please Explain
- 
- 

### Employment History

Name of Company Address of Company	Dates worked (From)	Dates worked (To)	Starting Salary	Ending Salary	Reason for Leaving	Name, Title, & Phone # of your Supervisor

References:

Name: \_\_\_\_\_ Company/Title: \_\_\_\_\_

Address:  
\_\_\_\_\_

Relationship: \_\_\_\_\_ Contact #: \_\_\_\_\_

Name: \_\_\_\_\_ Company/Title: \_\_\_\_\_

Address:  
\_\_\_\_\_

Relationship: \_\_\_\_\_ Contact #: \_\_\_\_\_

Name: \_\_\_\_\_ Company/Title: \_\_\_\_\_

Address:  
\_\_\_\_\_

Relationship: \_\_\_\_\_ Contact #: \_\_\_\_\_

Name: \_\_\_\_\_ Company/Title: \_\_\_\_\_

Address:  
\_\_\_\_\_

Relationship: \_\_\_\_\_ Contact #: \_\_\_\_\_

Other Relevant Information

*Describe any skills, or non-employment experience such as trainings or certifications that might strengthen your application:*

\_\_\_\_\_  
\_\_\_\_\_