

## **Employment Application**

## Please complete entire application

		Applicant Ir	ntormation							
Full Name:					Date:					
A ddrooo	Last	First		M.I.						
Address:	Street Address		Apartment/Unit #							
	City			State	ZIP Code					
Home Phor	ne: <u>(</u> )	E-mai	il Address:							
Cell Phone:	( )	Date /	Date Available:		sired Salary: \$					
Position Applied for: Part Time Studio Staff										
Shift Availability: Circle days & A (a.m.) P (p.m.) Mon A P Tue A P Wed A P Thu A P Fri A P Sat A P Sun A P										
Are you a citizen of the United States?  YES NO  If no, are you authorized to work in the U.S.?										
Have you ever worked for this company?  YES NO  If so, when?										
Have you ever been convicted of a felony?										
If yes, explain:										
Education										
High Scho	ol:	Address:								
From:	To:		YES NO	Degree:						
College:				J						
From:	То:		YES NO	Degree:						
Other:		Address:								
From:	То:	Did you graduate?	YES NO	Degree:						
	0.									
References  Please list three professional or personal references.										
Full Name:			Relationship:							
Company:				Phone: (	)					
Address:										
Company:				Phone: (	)					
Address:										
					)					

Previous Employment									
Company:			Phone: (	Phone: ( )					
Address:			Supervisor:						
Job Title:		Starting Salary: _\$		Ending Salary: _\$					
Responsibiliti	es:								
From: _	To: Rea		NO						
May we conta	act your previous supervisor for a refer	rence?	NO						
Company:			Phone: (						
Address:			Supervisor:						
Job Title:		Starting Salary: _\$_		Ending Salary: \$					
Responsibiliti	es:								
From:	To: Rea		NO						
May we conta	act your previous supervisor for a refer	rence?	NO						
Company:			Phone: (	)					
Address:			Supervisor:						
Job Title:		Starting Salary: <b>\$</b> _	<u></u>	Ending Salary: \$					
Responsibiliti	es:								
From:	To: Rea	ason for Leaving: YES	NO						
May we conta	act your previous supervisor for a refer								
School Schedule									
Start Date:	_	End	Date:						
Times: Monday									
Tuesday									
Wednesday Thursday									
Friday									
Saturday									
Sunday									
Disclaimer and Signature									
I certify that my answers are true and complete to the best of my knowledge.									
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.									
My signature on this form gives my permission for any and all of this information to be verified by this employer.									
Signature:				Date:					