

Application for Employment

Print and return completed applications to Whim Wham Pottery & Art studio or email to info@whimwhamartstudio.com. Incomplete applications will not be considered.

Personal Information (please print):
Name:
Present Address:
Are you 18 years of age or older? (If not, age) Phone:
Date you can start: Desired salary:
Have you ever been known by another name? Yes No If yes, please list
Have you ever been convicted on a felony crime? Yes No If yes, please explain
Can you perform the essential functions of the position for which you're applying (will include 5 -6 hour shifts where all or most will be standing & lifting boxes up to 50 lbs.) with or without reasonable accommodations? YesNo
Do you have reliable transportation to get to and from work? Yes No
What skills/experience do you bring to Whim Wham Pottery and Art Studio?
What is your definition of excellent customer service?
Why would you like to work for Whim Wham Art Studio?
AVAILABILITY Please specify hours available for each day of the week:

Thursday

Friday

Saturday

Sunday

Monday

Tuesday

Wednesday

Employment History

Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.

Name of Employer:			Name of last supervisor:			
Address:			Employed from to			
			Starti	ng salary:	Ending salary:	
Phone number:			Last job title:			
List jobs held, dut	ies performed, skills used or learn	ed, advancer	ments o	promotions while a	nt this company.	
Reason for leaving	g (be specific):					
						_
Name of Employer:			Name of last supervisor:			
Address:			Employed from to			
			Starti	ng salary:	Ending salary:	
Phone number:			Last job title:			
List jobs held, dut	ies performed, skills used or learn	ed, advancei	ments oi	promotions while a	at this company.	
Reason for leaving	g (be specific):					-
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May we conta	act your present employ	ver? Ye	25	No		-
viay we conti	ace your present emplo	y C1				
Education						
High School	Name & Address of School	Years Comp	pleted	Graduated Y/N	Subjects studied/Degree	
College	Name & Address of School	Years Comp	pleted	Graduated Y/N	Subjects studied/Degree	
Post College	Name & Address of School	Years Comp	pleted	Graduated Y/N	Subjects studied/Degree	
I certify that a	all of the information in	cluded ir	n this	annlication is	true.	
	,,					
Signature				Date		