



EMPLOYMENT APPLICATION

PLEASE PRINT					Today's date: _____
_____	_____	_____	_____		
First Name	M.I.	Last Name	Preferred Name/Nickname		
_____	_____	_____	_____	_____	
Street Address	Apartment #	City	State	Zip Code	
_____	_____	_____	_____	_____	
_____	_____	_____			
Home Phone	Alternate/Work Phone	E-Mail Address			

PLEASE PLACE A CHECK BY YOUR RESPONSE OR PROVIDE THE APPROPRIATE INFORMATION				
Are you interested in:	Full-time _____	Part-time _____	Temporary _____	
How did you hear about the position?	Classified Ad _____	Friend (Name) _____	Radio _____	Internet _____
Desired Pay:	Hourly Pay (minimum if applicable) _____ Annual Pay (minimum) _____ Annual Pay (desired) _____			
When are you able to start work? (Date)	_____	Position desired:	_____	

PLEASE CHECK YES OR NO TO THE FOLLOWING:	
Are you authorized to work in the United States?	Yes _____ No _____
Federal law requires that employers hire only individuals who are authorized to be lawfully employed in the United States. In compliance with these laws, Newman Brothers Painting will verify the status of every individual offered employment with the Company. In this connection, all offers of employment are subject to verification of the applicant's identity and employment authorization, and it will be necessary for you to submit such documents as are required by law to verify your identification and employment authorization.	
Are you under 18 years of age?	Yes _____ No _____ If yes, can you furnish a work permit? Yes _____ No _____
Are you capable of performing the essential functions of the job for which you are applying with or without a reasonable accommodation?	Yes _____ No _____
Do you have a valid drivers' license?	Yes _____ No _____
_____	_____
License No.	Issuing State

Newman Brothers Painting, LLC is an equal opportunity employer and does not discriminate against any applicant or employee because of race, color, religion, sex, national origin, disability, age, or military or veteran status in accordance with federal law. In addition, Newman Brothers Painting complies with applicable state and local laws governing non-discrimination in employment in every jurisdiction in which it maintains facilities. Newman Brothers Painting also provides reasonable accommodation to qualified individuals with disabilities in accordance with applicable laws.



PLEASE LIST YOUR WORK EXPERIENCE BELOW (MOST RECENT JOB FIRST)

COMPANY NAME				YOUR POSITION and TITLE			
FROM <u> </u> / <u> </u> / <u> </u> MO. YR.		NO. & STREET			SUPERVISOR'S NAME, TITLE and POSITION		
CITY		STATE	ZIP CODE		SUPERVISOR'S TELEPHONE NUMBER		
TYPE OF BUSINESS		STARTING PAY \$	FINAL PAY \$		MAY WE CONTACT YOUR EMPLOYER?		
TO <u> </u> / <u> </u> / <u> </u> MO. YR.		TELEPHONE NUMBER ()	TERMINATION <input type="checkbox"/> VOLUNTARY <input type="checkbox"/> INVOLUNTARY		REASON		
BRIEFLY DESCRIBE YOUR <u>MAJOR DUTIES</u>							

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BRIEFLY DESCRIBE YOUR <u>MAJOR DUTIES</u>							



ADDITIONAL INFORMATION:

UNEMPLOYMENT ACCOUNT FOR ALL PERIODS OF TIME, THREE MONTHS OR MORE, BETWEEN POSITIONS HELD OR AFTER SCHOOL

FROM _____/_____ _____	TO _____/_____ _____	HOW DID YOU SPEND THIS TIME? _____ _____
FROM _____/_____ _____	TO _____/_____ _____	HOW DID YOU SPEND THIS TIME? _____ _____

EDUCATION:

NAME AND ADDRESS OF SCHOOL	MAJOR SUBJECT	DID YOU GRADUATE?	TYPE OF DEGREE OR DIPLOMA
HIGH SCHOOL OR PREP			
COLLEGE			
COLLEGE OR GRADUATE			
OTHER			

PROFESSIONAL LICENSES:

TYPE OF LICENSE	STATE GRANTING LICENSE	LICENSE NUMBER
TYPE OF LICENSE	STATE GRANTING LICENSE	LICENSE NUMBER

REFERENCES: Please list three professional references

NAME	RELATIONSHIP	COMPANY	PHONE/ALTERNATE PHONE



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PLEASE READ CAREFULLY BEFORE SIGNING APPLICATION

I have submitted the attached form to the company for the purpose of obtaining employment. I acknowledge that the use of this form, and my filling it out, does not indicate that any positions are open, nor does it obligate the company to further process my application.

My signature below attests to the fact that the information that I have provided on my application, resume, given verbally, or provided in any other materials, is true and complete to the best of my knowledge and also constitutes authority to verify any and all information submitted on this application. I understand that any misrepresentation or omission of any fact in my application, resume or any other materials, or during any interviews, can be justification for refusal of employment, or, if employed, termination from the Company's employ.

I also affirm that I have not signed any kind of restrictive document creating any obligation to any former employer that would restrict my acceptance of employment with the Company in the position I am seeking.

I understand that this application is not an employment contract for any specific length of time between the Company and me, and that in the event I am hired, my employment will be "at will" and either the Company or I can terminate my employment with or without cause and with or without notice at any time. Nothing contained in any handbook, manual, policy and the like, distributed by the Company to its employees is intended to or can create an employment contract, an offer of employment or any obligation on the Company's part. The Company may, at its sole discretion, hold in abeyance or revoke, amend or modify, abridge or change any benefit, policy practice, condition or process affecting its employees.

References: In connection with my application for employment and as a condition of continuing employment, I understand that investigative background inquiries may be made on me including previous employers, schools, consumer credit, criminal convictions, motor vehicle, and other reports. These reports will include information as to my character, work habits, performance, education, compensation, and experience along with reasons for termination of employment from previous employers. Furthermore, I understand that the company may be requesting information from various federal, state, and other agencies which maintain records concerning my past activities relating to my driving, credit, criminal, civil, and other experiences as well as claims involving me in the files of insurance companies. I authorize without reservation, any party or agency contacted to furnish the above mentioned information and release all parties involved from liability and responsibility for doing so. I hereby consent to obtaining the above information from Newman Brothers Painting, LLC and/or any of their agents. This authorization and consent shall be valid in original, fax, or copy form. All applications will be kept on file for ninety (90) days.

SIGNED: _____

DATE: _____