

Employment Application for



Quality Finishes with Lasting Results

Must be 18 years or older to apply

I. Personal Information

Name _____
(Last) (First) (Middle)

Address _____

City _____ State _____ Zip _____

How long have you lived at this address? _____

Telephone Number (_____) _____

Social Security Number _____ Date of Birth _____

Have you ever been convicted of a felony? _____ Yes or _____ No

If yes, state the nature of the offense, where and when it occurred, and the sentence imposed: _____

Have you ever been convicted of a misdemeanor within the past seven years? (Do not include convictions for speeding or other minor traffic violations or first convictions for disorderly conduct, disturbing the peace, driving under the influence, public intoxication, or drunkenness)
_____ Yes or _____ No If yes, please explain:

II. Vehicles

Do you have a Valid Driver's License? _____ Yes or _____ No
If Yes What State? _____ Driver's License Number _____

Have you had any traffic related violations or conviction? _____ Yes or _____ No

If Yes, Please Explain: _____

III. Employment Information

Position Desired _____ Wage Desired _____

Currently Employed? _____ Yes or _____ No Availability _____

Have you ever applied with this company before? _____ Yes or _____ No
If yes, when _____

Have you ever worked for this company before? _____ Yes or _____ No
If yes, when _____

Total Hours Available Per Week _____

Are there any limitations to your work hours? _____ Yes or _____ No
(i.e., can't work nights, particular weekends, etc.)

If yes, please explain: _____

IV. Experience

Please List Your Last Three Employers Beginning With The Most Recent.

Name of Employer _____
Type of Business _____ Phone (_____) _____
Address _____ City _____ State____
Salary Wages: \$ _____ Employed From: _____ To: _____
Last Position _____ Supervisor's Name _____
Reason For Leaving _____

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Address _____ City _____ State____
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Last Position _____ Supervisor's Name _____
Reason For Leaving _____

The purpose of this information is to help us gain a better understanding of your experience in the paint industry. Your answers will help us evaluate which position and pay scale you are best qualified for.

Check the types of access equipment you have experience with:

- Boom Truck
- Extension Ladder
- Ladder Plank
- Step Ladder
- Scaffolding
- Pump Jacks

Check the types of painting equipment you have experience with:

- Airless Sprayer
- Brush
- Grinder
- Power Wall Sanders
- Hand Masker
- Heat Gun
- Paint Shaver
- Sanding pole
- Putty knife
- Orbital Sander
- Heat gun/Torch
- HVLP
- Detail Sander
- Texture Machine

Check the types of material you have experience with and describe that type(s) of applications you have used them for:

Wallcoverings	
Latex Paint	
Alkyd Paint	
Varnish	
Wood Stain	
Semi-Transparent Stain	
Solid Stain	
Epoxy	
Enamel	
Caulk (specify type used)	
Joint Compound	
Glazing Putty	
Linseed Oil	
Naphtha	
Glaze	
Wilbond/Deglosser	
Durobond 45	
Penetrol	

Problem Solving: Check problems you have encountered and describe your Remedies

Alligating of paint	
Oxidation/Chalking	
Gray Wood	
Mold/Mildew	
Fading of paint	
Tannin Bleeding	
Surfactant Leaching	
Heavy roller stipple	
Nail pops	
Loose tape at joints	
Airless pump won't prime	
Water damage in center of textured ceiling	
Lap Marks	

Questions:

When painting walls:

What is your favorite paint?	
What is your favorite painting tool?	
What is your favorite painting skill?	
What is your least favorite painting activity?	

Do you prefer new construction or remodeling work?	
What tip size do you prefer for latex ceiling paint?	
What tip size do you prefer for oil base varnish?	

V. Education

Level	Name & Location of School	Recognition of Completion
High School Vocational, Technical, or Other School College		Diploma? ____ Yes or ____ No Certificate? ____ Yes or ____ No ___ Some College ___ Undergraduate Degree ___ Currently Pursuing
Graduate School		___ Some College ___ Graduate Degree ___ Currently Pursuing

VI. References

Please List The Names Of 3 Persons Whom You Have Known For At Least One Year. Do Not Include Relatives.

Name: _____ Position/Company _____

Address: _____ Years Acquainted: ____ Phone (____) _____

City/State/Zip: _____

Name: _____ Position/Company _____

Address: _____ Years Acquainted: ____ Phone (____) _____

City/State/Zip: _____

Name: _____ Position/Company _____

Address: _____ Years Acquainted: ____ Phone (____) _____

City/State/Zip: _____

VII. General Information

Do you have any physical or emotional limitations that may affect your job performance?

_____Yes or _____No If yes, please explain.

Do you have limitations getting to and from work? _____Yes or _____No

If yes, please explain _____

Have you received any formal training in the painting industry? _____or _____No

If yes, please explain

Please explain why you are qualified for a job with this company.

PLEASE READ AND SIGN THE BOTTOM.

I declare that all statements and answers in this application are true and complete in all respects. I acknowledge and agree that any false statement, misleading answer, omission, concealment, or failure to answer any question fully, completely, and accurately will be grounds for terminating my employment irrespective of when the information is discovered.

I authorize Lake Area Painting & Decorating, Inc. at any time prior to or during my employment, to: a) investigate my references; b) communicate with my former employers; c) conduct an independent investigation of my character, conduct and employment record, including, without limitation, a criminal background check and/or request a credit report and/or request an investigative background credit report. I understand, that the results of investigation or background checks may be kept and preserved. Additionally, I release all parties from all liability for any damage that may result from furnishing information to Lake Area Painting & Decorating, Inc.

I agree that upon termination of my employment I will return all Company property and records in my possession.

Signature of Applicant

Date