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Licensed & Bonded
MHIC # 4300

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Application for Employment

Pre-employment questionnaire. An equal opportunity employer.

All applicants considered for employment may submit to a substance abuse screening.

Position applied for _____ Date you can start work _____

Salary desired _____ Are you employed now? Yes No

Current employer _____ Phone _____

May we contact your present employer? Yes No Supervisor _____

Have you ever applied to this company Yes No When? _____

Personal information

Name _____, _____, _____
Last First Middle

Address _____

City _____ ST _____ Zip _____

Phones Home _____ Cell _____

Gender Male Female Age _____ Date of birth _____

Marital status _____ # of dependents, including yourself _____

Driver's License # _____ Height _____ Weight _____

If no license, why not? _____

Citizen of the US? Yes No

Have you ever been convicted of a felony or misdemeanor within the past 5 years? If yes, please explain below.

Education	Name of school	Years attended	Did you graduate?
High school			
College			
Trade or Business			
Field of study			

Experience List at least 4 former employers below, starting with the most recent one first.

1. Name _____ Phone _____

Address _____

Position _____ From _____ To _____

Salary _____ Reason for leaving _____

2. Name _____ Phone _____
 Address _____
 Position _____ From _____ To _____
 Salary _____ Reason for leaving _____

3. Name _____ Phone _____
 Address _____
 Position _____ From _____ To _____
 Salary _____ Reason for leaving _____

4. Name _____ Phone _____
 Address _____
 Position _____ From _____ To _____
 Salary _____ Reason for leaving _____

Physical record

Do you have any physical limitations that preclude you from performing any work for which you are being considered?
 Yes No If yes, please explain and describe below.

In case of an emergency, notify _____

Relationship _____ Phone(s) not already listed _____

References List the names of 3 persons not related to you that you have know for at least one year.

	Name	Address	Phone	Years known
1.				
2.				
3.				

I hereby certify that the facts contained in this application are true and complete to the best of my knowledge and understand that if employed falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have personal or otherwise and release all parties from all liability for any damage that may result from furnishing same to you.

I understand and agree that if hired my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any prior notice.

Signature _____ Date _____

Additional comments or information you would like to include about yourself:

New hires only Social Security # _____