



Aurora Pro Painting, Inc.

APPLICATION FOR EMPLOYMENT

Aurora Pro Painting, Inc. is an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including age, sex, color, race, creed, national origin, religion, marital status, political belief or disability. Aurora Pro Painting, Inc. is also a drug-free working environment and employees are subject to random drug testing.

PERSONAL INFORMATION

DATE / /

Name (Last)	First	(Middle)	Social Security Number — —	
Home Address		City	State	Zip
Home Telephone ()	Cell Phone (optional) ()	Date of Birth / /		
Position Applying For: Painter <input type="checkbox"/> Foreman <input type="checkbox"/>	Hourly Wage Required \$ _____	Currently employed? Yes <input type="checkbox"/> No <input type="checkbox"/>	Date Available: / /	Years of professional painting experience: _____
On occasion, this position may require you to work later than 5pm or Saturdays. Are you available to work these extra hours if required? Yes <input type="checkbox"/> No <input type="checkbox"/> If No, explain:				
Do you have a valid Driver's License? Yes <input type="checkbox"/> No <input type="checkbox"/>		D.L.#:	State:	Exp. Date: / /
Would you be able to provide your own transportation to work? Yes <input type="checkbox"/> No <input type="checkbox"/>				
Please provide any other names or aliases that you have used:				
Do you have any physical or emotional limitations that would affect your ability to perform tasks related to this position (i.e. climbing ladders, lifting heavy equipment, bending) Yes <input type="checkbox"/> No <input type="checkbox"/>				
Are you allergic to paint, latex, mineral spirits, or products one would reasonably expect to use as a professional painter? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, List Allergy:				
How were you referred to Aurora Pro Painting? _____				

LEGAL

Are you a U.S. Citizen or do you have a legal right and necessary documents to work in the U.S.? Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you ever been discharged by any company? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, name of company: _____ Reason for discharge: _____
Have you ever been convicted of a crime other than a minor traffic violation? Yes <input type="checkbox"/> No <input type="checkbox"/> (Note: You are not obligated to discuss sealed or expunged records of conviction or arrest nor will such information be asked of you or considered in employment decisions.) The existence of a criminal record will not automatically disqualify you from the job for which you are applying. If yes, please explain offense and final disposition: _____ _____ _____

U.S. MILITARY SERVICE

BRANCH OF SERVICE	TECHNICAL SPECIALIZATION	RANK ATTAINED

EDUCATION

TYPE OF SCHOOL	NAME AND LOCATION OF SCHOOL	DEGREE/AREA OF STUDY	# YEARS ATTENDED	GRADUATED (CHECK ONE)
High School				Yes <input type="checkbox"/> No <input type="checkbox"/>
Vocational School or Professional Training				Yes <input type="checkbox"/> No <input type="checkbox"/>
College or University				Yes <input type="checkbox"/> No <input type="checkbox"/>
Other				Yes <input type="checkbox"/> No <input type="checkbox"/>

EMPLOYMENT HISTORY

List employment starting with your most recent position. Account for any time during this period that you were unemployed by stating the nature of your activities.
 May we contact your present employer? Yes No Past employers? Yes No
 (Please indicate if you were employed under a different name.)

DATES	NAME AND ADDRESS OF EMPLOYER	POSITION HELD AND SUPERVISOR	LIST MAJOR DUTIES	SALARY OR WAGES	REASON FOR LEAVING
From: _____/_____/_____ mo. yr.	Name _____ City/State _____ Phone _____	Your job title: _____ Supervisor's Name: _____		Starting: _____ Final: _____	
From: _____/_____/_____ mo. yr.	Name _____ City/State _____ Phone _____	Your job title: _____ Supervisor's Name: _____		Starting: _____ Final: _____	
From: _____/_____/_____ mo. yr.	Name _____ City/State _____ Phone _____	Your job title: _____ Supervisor's Name: _____		Starting: _____ Final: _____	
From: _____/_____/_____ mo. yr.	Name _____ City/State _____ Phone _____	Your job title: _____ Supervisor's Name: _____		Starting: _____ Final: _____	

SKILLS & INTERESTS PLEASE RATE YOURSELF IN THE FOLLOWING SKILLS, INCLUDE NUMBER OF YEARS EXPERIENCE FOR EACH:

	NO EXPERIENCE	SOME EXPERIENCE (1 – 4 Years)	SKILLED (5 – 10 Years)	VERY SKILLED (11+ Years)
Residential Repaints — Exterior				
Residential Repaints — Interior				
New Construction — Exterior				
New Construction — Interior				
Commercial — Exterior				
Commercial — Interior				
Brush and Roll				
Cutting in with a Brush				
Sanding, Scraping, Prepping				
Airless Spraying				
Jobsite Planning				
Managing Others				
Carpentry (wood replacement)				
Drywall Hanging				
Drywall Repair (taping, patching, sanding)				
Paper Hanging (wallpaper)				
Wood Staining				

REFERENCES

Please provide 3 personal or professional references (please do not list relatives)				
Name	E-mail Address	Phone Number	Relationship	Years Known
		()		
		()		
		()		

PLEASE READ CAREFULLY

I understand that, with my authorization, an investigation may be made whereby information is obtained regarding my character, previous employment, general reputation, educational background, credit record and/or criminal history, subject to applicable federal, state and/or local laws.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in immediate dismissal. I understand, also, that I am required to abide by all rules and regulations of Aurora Pro Painting, Inc.

I understand and agree that if employed, the employment will be "at will". That is, either I or Aurora Pro Painting, Inc. may end the employment relationship at any time, for any reason, or for no reason. I understand that receipt of this application by Aurora Pro Painting, Inc. does not imply employment and that this application and/or any other Aurora Pro Painting, Inc. documents are not contracts of employment.

Applicant's Signature

Date Signed