

# Paint Your Pot Employee Application

Today's Date: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First MI

Address: \_\_\_\_\_  
Street  
\_\_\_\_\_  
City State Zip

Phone Number: \_\_\_\_\_  
Cell - Home - Work

Are you 18 years or older? Yes No If no, Age: \_\_\_\_\_

Have you ever pleaded guilty to or been convicted of a crime, felony, or other violation of law (other than minor traffic offenses) in the past seven years:

Yes No

If yes, explain the nature of the offense, date, and location:

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Position Desired: \_\_\_\_\_  
Salary Desired: \_\_\_\_\_

Full Time  
Evenings

Part Time  
Temporary

Please indicate below the days and time you are available to work.

Sun	Mon	Tues	Weds	Thur	Fri	Sat

Date Available to Start: \_\_\_\_\_

Desired Hours Per Week: \_\_\_\_\_

How were you referred to Paint Your Pot?: \_\_\_\_\_

Special Courses or Training:

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Experience/Skills Related to the desired Position:

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References:

\_\_\_\_\_  
Name Phone Number Relation Occupation

\_\_\_\_\_  
Name Phone Number Relation Occupation

\_\_\_\_\_  
Name Phone Number Relation Occupation

**Education:**

School	Name & Location	Course of Study	# of years Completed	Highest Grade Completed	Type of Degree
High School					
Business or Trade School					
College					
Graduate School					

**Work Experience:** (Start with your most present or last job.)

Company Name	Position and Description of Work Performed
Address	Date Employed From: _____ To: _____
Name of Supervisor	Rate of Pay Start: _____ Last: _____
Telephone Number	Reason for Leaving

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I certify that all statements I have made on this application are true and correct:

\_\_\_\_\_

Applicants Signature

\_\_\_\_\_

Date