EMPLOYMENT APPLICATION

Please complete the entire application.

1. Employer Info	ormation
Employer:	Beyond Pro Custom Painting
	P.O Box 1236
	ceres, California 95307
Telephone:	209-567-2940
applicants and employ	ond Pro Custom Painting to provide equal employment opportunities to all yees without regard to any legally protected status such as race, color, nal origin, age, disability or veteran status.
2. Applicant Info	ormation
Applicant Full Name:	
Home Address:	
City/State/ZIP:	
Number of years at the	nis address:
	Evening phone:
	per:
	re/Number):
3. Emergency C	Contact
Who should be contact Name:	cted if you are involved in an emergency?
Relationship to you:	
Address:	
City/State/ZIP:	
Daytime phone:	Evening phone:
4. Job Position A Full or Part T	Applied For:ime?

Salary Desired: \$ _____ per ____

5.

6.	Do you have any friends or relatives who work here? If yes, please list here:					
7.	Have you applied to our company previously? If yes, when?		No			
8.	Are you at least 18 years old?	Yes]	No			
9.	Are you willing to work any shift, including nights and weekends? Yes No If no, please state any limitations:					
10.	If applicable, are you available to work overti	me? Yes No				
11.	If you are offered employment, when would you be available to begin work?					
12.						
13.	Are you able to perform the essential functions of the job position you seek with or without reasonable accommodation? Yes No					
	What reasonable accommodation, if any, woul	d you request?				
14.	Applicant's Skills					
seekir	those skills that you have. List any other skills the fig. Enter the number of years of experience, and ability for each particular skill. (One represents post.)	circle the number which co	orresponds to			
	xill	Years of Experience	Ability or Rating			
[]		,	12345			
[] []			1 2 3 4 5 1 2 3 4 5			
[]			12345			
			12345			
			12345			

15. Applicant Employment History

List your current or most recent employment first. Please list all jobs (including self-employment and military service) which you have held, beginning with the most recent, and list and explain any gaps in employment. If additional space is needed, continue on the back page of this application.

Employer Name:			
Supervisor Name:			
Address:			
City/State/ZIP:			
Job Duties:			
Reason for Leaving:			
Dates of Employment	(Month/Year):		
Employer Name:			
Supervisor Name:			
Address:			
City/State/ZIP:			
Job Duties:			
Reason for Leaving:			
Dates of Employment	(Month/Year):		
Employer Name:			
Supervisor Name:			
Address:			
City/State/ZIP:			
Job Duties:			
Reason for Leaving:			
Dates of Employment			
16. Applicant's Ed	ducation and Training		
College/University Na	ame and Address		
Did you receive a deg	gree?Yes	No	If yes, degree(s) received
High School/GED Na	ame and Address		
Did you receive a deg	gree?Yes	No	
Other Training (gradu	ate, technical, vocation	nal):	

Awards, Honors,	Special Achieve	rements:			
17. Reference	es				
List any two non-	relatives who w	ould be will	ing to provide	a reference for	you.
Name:					
Address:					
City/State/ZIP:					
Telephone:					
Relationship:					
Name:					
Address:					
City/State/ZIP:					
Telephone:					
Relationship:					
•					
18. Please pro	ovide any other	information	that you belie	ve should be co	nsidered,

CERTIFICATION

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize Beyond Pro Custom Painting to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment and education.

If an employment relationship is created, I understand that unless I am offered a specific written contract of employment signed on behalf of the organization by its Manager, the employment relationship will be "at-will." In other words, the relationship will be entirely voluntary in nature, and either I or my employer will be able to terminate the employment relationship at any time and without cause. With appropriate notice, I will have the full and complete discretion to end the employment relationship when I choose and for reasons of my choice. Similarly, my employer will have the right. Moreover, no agent, representative, or employee of Beyond Pro Custom Painting, except in a specific written contract of employment signed on behalf of the organization by its Manager, has the power to alter or vary the voluntary nature of the employment relationship.

I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERST AND AGREE TO ITS TERMS.		
APPLICANT SIGNATURE	DATE	