



**EMPLOYMENT:** List last employment first. Include summer or temporary jobs. Be sure all your experience or employers related to this job are listed here, in the summary (following this section), or use an extra sheet of paper if necessary.

Employer Name and Address	Position Title/Duties Skills	Dates Employed from _____ to _____
		Reason for leaving
		Supervisor's Name: _____ Telephone: _____

Employer Name and Address	Position Title/Duties Skills	Dates Employed from _____ to _____
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Employer Name and Address	Position Title/Duties Skills	Dates Employed from _____ to _____
		Reason for leaving
		Supervisor's Name: _____ Telephone: _____

Summarize other employment related to this job: \_\_\_\_\_

Professional Licenses, Certifications or Registrations: \_\_\_\_\_

Additional skills including supervision skills, other languages, or information regarding the career/occupation you wish to bring to the employer's attention: \_\_\_\_\_

In case of accident or illness please contact: Name: \_\_\_\_\_ Daytime phone: \_\_\_\_\_

Address: \_\_\_\_\_ Relationship: \_\_\_\_\_

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I certify that answers given in this application are true and complete to the best of my knowledge. I understand that false or misleading information given in my application or interview(s) may be reason for Posten Painting, Inc. not to hire me, or if I am hired, for dismissal from employment. I also understand that I am required to abide by all rules and regulations of the employer, and applicable state and federal law.

I understand that as a condition of employment, I may be required to undergo and successfully pass a screening for drugs. I also understand and agree that, if employed, I may be required to submit to an alcohol or drug testing under Posten Painting, Inc.'s policies. I hereby consent to having the results of any such alcohol or drug testing I may be required to undergo disclosed to Posten Painting, Inc.

I authorize and request that all of my present and former employers, schools, supervisors (as indicated above), and those individuals I have listed as personal references furnish information about my employment record, character, including a statement of the reason for the termination of my employment, work performance, abilities, and other qualities pertinent to my qualifications for employment, and I hereby release them from any and all liability for damages arising from furnishing the requested information and agree to hold all persons who provide information to Posten Painting, Inc. harmless with respect to the information they may give, receive, or publish.

I HEREBY UNDERSTAND AND ACKNOWLEDGE THAT, IF HIRED, MY EMPLOYMENT RELATIONSHIP WITH POSTEN PAINTING, INC. WOULD BE OF AN "AT WILL" NATURE, WHICH MEANS THAT I MAY RESIGN AT ANY TIME AND THE EMPLOYER MAY DISCHARGE ME AT ANY TIME AND FOR ANY OR NO REASON. IT IS FURTHER UNDERSTOOD THAT THIS "AT WILL" EMPLOYMENT RELATIONSHIP MAY NOT BE CHANGED BY ANY WRITTEN DOCUMENT OR BY CONDUCT UNLESS SUCH CHANGE IS SPECIFICALLY ACKNOWLEDGED IN WRITING BY AN AUTHORIZED OFFICER OF POSTEN PAINTING, INC.

I understand and agree to the information shown above:

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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Employer Section: