



Painting • Waterproofing • Restoration

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

**APPLICATION FOR EMPLOYMENT**

We consider applicants for all positions without regard to race, color, religion creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ City/State: \_\_\_\_\_ ZIP \_\_\_\_\_

Drivers License? \_\_\_ Y or N State: \_\_\_\_\_ Exp: \_\_\_\_\_ License # \_\_\_\_\_

Telephone# (Home): \_\_\_\_\_ (Cell): \_\_\_\_\_

In case of emergency notify: \_\_\_\_\_

Name	Relationship	Phone#
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How did you learn about us? \_\_\_ advertisement \_\_\_ friend \_\_\_ walk-in \_\_\_ relative \_\_\_ other, please explain: \_\_\_\_\_

Are you over the age of 18? Yes or No (please circle one)

Are you currently employed? Yes or No (please circle one)

May we contact your current employer? Yes or No (please circle one)

Are you authorized to work in the United States? Yes or No (please circle one) Proof of citizenship or immigration status will be required upon employment.

On what date would you be available to work? \_\_\_\_\_

Are you available to work overtime on occasion? Yes or No (please circle one)

Are you currently on "lay-off" status subject to recall? Yes or No (please circle one)

Can you travel if a job requires it? Yes or No (please circle one)

You may be required to travel or work overtime on short notice. Is this a problem for you? Yes or No (please circle one)

Do you have your own transportation? Yes or No (please circle one)

What languages do you read, speak, or write fluently? Yes or No (please circle one) \_\_\_\_\_

**EXPERIENCE**

Years of Experience Carpentry: \_\_\_\_\_ Years of Experience Finish: \_\_\_\_\_ Years of Experience Framing: \_\_\_\_\_

Years of Experience Painting: \_\_\_\_\_ Years of Experience Caulking: \_\_\_\_\_ Years of Experience Sealants: \_\_\_\_\_

Kind of experience: Please check any of the following areas in which you have experience: Aerial Staging \_\_\_ Multi-Component

Coating: \_\_\_\_\_ Multi-Component Sealants: \_\_\_\_\_ Airless Spraying: \_\_\_\_\_ Brush/Roll: \_\_\_\_\_ Power Rolling: \_\_\_\_\_

Sand Blasting \_\_\_ OTHER: \_\_\_\_\_

**PREVIOUS EMPLOYMENT**

Name/Address of Company: \_\_\_\_\_

Phone#: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Exiting Wage \$ \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Name/Address of Company: \_\_\_\_\_

Phone#: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Exiting Wage \$ \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Name/Address of Company: \_\_\_\_\_

Phone#: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Exiting Wage \$ \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

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APPLICATION FOR EMPLOYMENT (continued)

COMPANY'S STATEMENT

Lamphier & Company is a Drug-Free Workplace.

Lamphier & Company is a professional company, therefore, our employees present a professional appearance on the job by adhering to our dress code: 1) White Painters Pants or Overalls must be worn. Shirts provided here. 2) Work boots must be worn, no sneakers. 3) No unsecured ponytails, unkempt beards or mustaches, hair a reasonable length and well groomed.

Hourly rate is fixed for at least the first 30 days without change. Health insurance will become available, expense shared with company, through payroll deduction, after 90 days of full time employment.

Due to a Florida law enacted in 2005, The Jessica Lunsford Act, and the type of work our firm performs employees are required to be fingerprinted and screened by means of a Level 2 screening which includes a statewide criminal and juvenile justice records check through the Florida Department of Law Enforcement and federal criminal records check through the Federal Bureau of Investigation. Level 2 screening may also include local criminal records checks through the local law enforcement agencies.

Please list any concerns or requirements you may have concerning employment such as distance you're willing to travel, hours you will work, weekends, dress code, etc. \_\_\_\_\_

APPLICANT'S STATEMENT

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as maybe necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any application wishing to be considered for employment beyond this time period shall inquire as to whether or not applications are being accepted at this time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. 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 executive of this organization.

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

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_