

Employment Application

Name: _____
Last First Middle Initial

Address: _____ City: _____

State: _____ Zipcode: _____ Social Security #: _____

Email: _____ Phone: _____

Are you 16 years of age or over? ☐ Yes ☐ No (Proof of age or work permit may be required)

Are you legally able to be employed in this country? ☐ Yes ☐ No

Have you ever been convicted of a felony? ☐ Yes ☐ No If Yes, please explain:

What position are you applying for? _____

☐ Part Time ☐ Full Time ☐ Seasonal ☐ Temporary

Hours Available:

	S	M	T	W	Th	F	S
From							
To							

Please list any days in the next 3 months that you would not be able to work:

Total Hours Available Per Week: _____ Date Available To Start: _____

Comments:

Education - List at least ONE formal school education

[Include, date attended, location, and if you received a diploma/degree]

Application for Employment

WORK EXPERIENCE Please list your work experience for the past five years beginning with your most recent job held.
If you were self employed, give firm name. Attach additional sheets if necessary.

Name of employer	Name of last supervisor	Employment dates	Pay or salary
Address		From:	Start:
City, State, Zip		To:	Final:
Phone number	Your last job title:		
Reason for leaving (be specific):			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company:			

Name of employer	Name of last supervisor	Employment dates	Pay or salary
Address		From:	Start:
City, State, Zip		To:	Final:
Phone number	Your last job title:		
Reason for leaving (be specific):			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company:			

May we contact your present employer? ☐ Yes ☐ No

Have you ever been involuntarily terminated from a position of employment? ☐ Yes ☐ No

If so, please explain. (This question does not apply to a layoff or reduction in force for economic reasons.)

Did you complete this application yourself? ☐ Yes ☐ No

If not, who did?

Please list two references other than relatives or previous employers:

1.	2.
Name:	Name:
Position:	Position:
Company:	Company:
Address:	Address:
Phone:	Phone:

Answers the questions below. There are no wrong or right answers and if you need more room feel free to write on the back!

1. Have you ever painted at Fire Escape before? If yes, how was your experience?

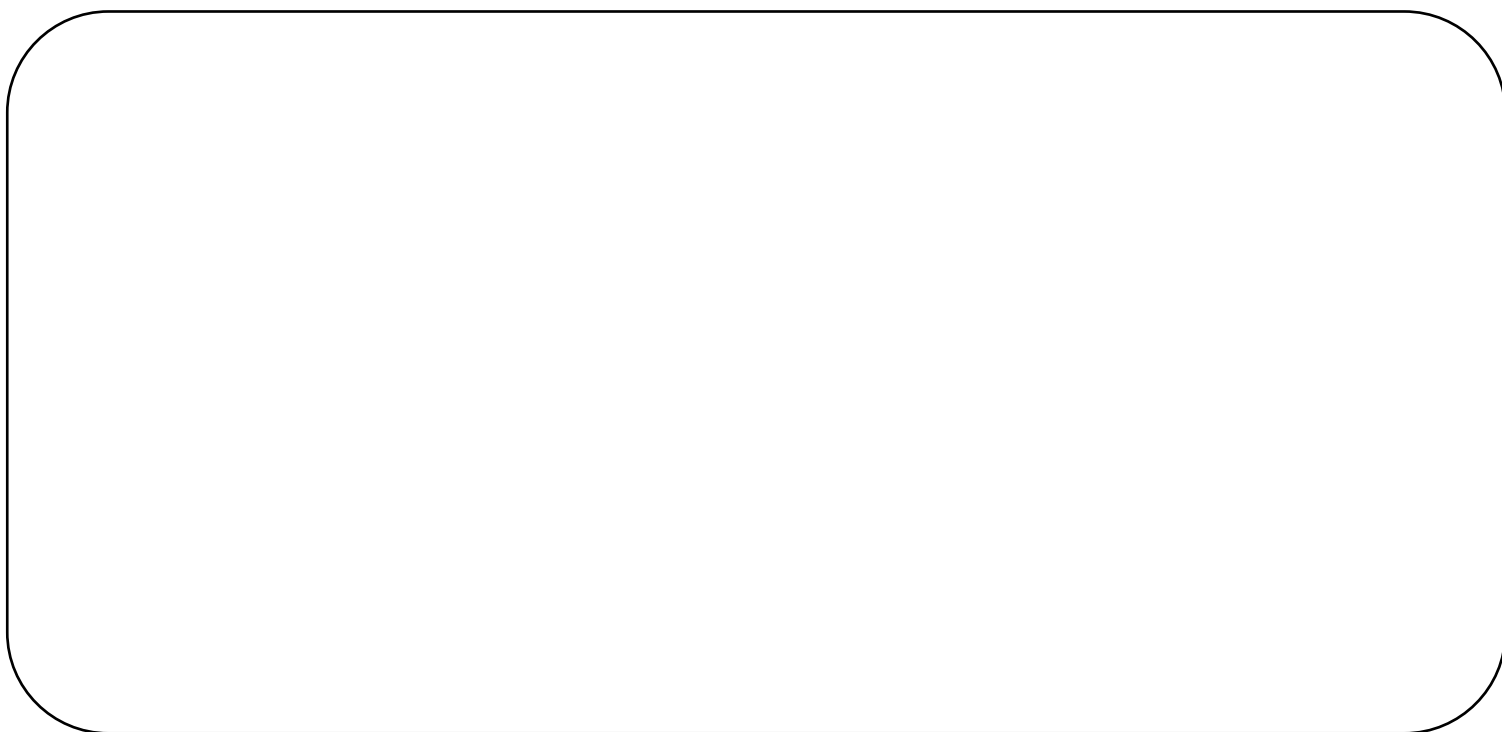
2.. What do you think working at Fire Escape entails?

3. If you could change one thing about Fire Escape what would it be?

4. What is one skill you have always wanted to improve?

5. If hired is there anything you are excited to do at Fire Escape? Nervous to do?

6. Draw a picture below. Title it.



7. What would you want to let us know that we haven't already asked?

.89
 .39
+2.59

\$20.25
- 8.50

Rate your skills on a scale of 1-10. We all have strengths and weaknesses and to show this we took the time to rate our skills.

Skill	Our Score	Your Score	Skill	Our Score	Your Score
Considerate	9		Communication	6	
Time Management	7		Hardworking	8	
Creative	9		Organized	4	
Photoshop/Design	8		Planning	4	
Marketing	8		Math	9	
Detail Oriented	6		Problem Solving	7	

What is your favorite family tradition?

If there was a speciality trivia night that you could win what would be the topic?

What is the most helpful way for you to get feedback?

If you were stuck in one TV show for a month which one would you choose?

How do you “recharge”?

Do you have a non-profit or organization that means a lot to you? Explain: