Please Print All Information

May we Contact your present employer?

(Proof of citizenship or immigration status is required upon employment.)

Date you can Begin Work:

Are you prevented from lawfully becoming employed in this country due to

Are you 18 Years or Older?

Visa or Immigration status?

You are Available to Work:

Application For Employment

Yes \square No

Yes □ No

Yes □ No

Part

Time

☐ Temporary

 \Box Full \Box Time

MY PAINT STOP LLC DBA: Creative Paint

5435 Geary Blvd San Francisco ca 94121 415-666-3308 Voice line 415-666-3310 Fax

Job Application

Date: _____ **Last Name:** First Name: Middle Name: Address: City: State: Zip Code: **Telephone Numbers:** Day_____ Social Security Number: Night___ **Position Applied For:** Shifts willing to work: (check all that apply) ☐ First Shift Second Shift □ Third Shift Salary or Hourly Rate expected: week (check one) hour Have you ever been employed by us before? Yes □ No If Yes, Date: Are you currently employed? Yes \square No

Education

School Address

College:								
conege.								
Technical/Other:								
List below all prese for whether employ						ecent. All ti	imes must	be accounted
Name and Address of Company and Type of Business	From		То	Describe in detail work you did and your title	Weekly Start Salary or Hourly Rate	Weekly End Salary or Hourly Rate	Reason for Leaving	Name, Title and Phone Number o Your Supervisor
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Major

Diploma/Degree

Credits Earned

APPLICANT'S STATEMENT and CONDITIONS OF EMPLOYMENT

(Please read carefully before signing.)

"I understand that an investigative consumer report involving information concerning my character, employment history, general reputation, police record, personal habits, mode of living, credit and indebtedness may be obtained prior to any final offer of employment. Upon timely written request to the personnel department of the company, the nature and scope of the report will be disclosed to me."

"I certify that the answers given by me in this employment application are true, correct and complete. I agree that the company shall not be liable, in any respect, if my employment is terminated because of misstatements or pertinent omissions made by me in this application. Moreover, I understand that all offers of employment are contingent upon passing the company's prescribed physical examination and drug screen."

"I agree, as a condition of my employment (should I be employed by the Company), to submit to a medical examination if requested and based on the position that I accept or urinalysis test if requested and paid for by the company I further agree to the search or examination of myself or personal property while on the company's premises or while conducting its business elsewhere, I also authorize any company, school, police or security personnel, or other person to give any information regarding my employment, habits, ability, or any other characteristics whatsoever, together with any information they have regarding me whether or not it is in their records. I hereby release all physicians, examiners, companies, schools, or other persons from liability for any damages whatsoever for such testing, examining, or issuing this information. It is agreed and understood that completion of this application does not mean a job opening exists and in no way obligates the company to employ me."

"In the event of employment, I will comply with all company rules and regulations as established from time to time including the company's substance abuse policy. I am willing to work all assigned overtime or other special work assignments as requested by the company. Furthermore, since the company does not offer contracts of employment (unless signed by the President), I understand that nothing contained herein is intended to create a contract between the company and me for either employment or the provision of any compensation or benefits. I understand that I have the right to terminate my employment at any time and likewise, the company has the same right."

"I hereby understand and acknowledge that any employment relationship with this Company 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 notice, with or without cause. It is further understood that this "At-Will" employment relationship may not be changed by any written document or by verbal agreement unless such change is specifically acknowledged in writing by an authorized Executive of this Company. I also understand that MY PAINT STOP LLC, Inc. retains the right to amend, modify, add or delete any or all policies or procedures at its sole and absolute discretion."

"During my employment with MY PAINT STOP LLC, Inc. and after my employment ends, I agree not to disclose any confidential or proprietary information regarding operating and trade secrets. I further agree that with respect to any civil litigation involving MY PAINT STOP LLC, Inc. in which I am a potential witness and which does not involve an actual or potential claim by me personally, I will not discuss the facts of the case with any third parties without first notifying MY PAINT STOP LLC representative or attorney of MY PAINT STOP LLC, Inc. is present. A copy of this form may be used as the original. The use of results from this form and/or tests will be used for prudent employment decisions."

This application is valid for sixty days from the applicat	ion date unless renewed in person or in writing.
Applicant's Signature:	Date:

It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

"Under Maryland law, an employer may not require or demand, as a condition of employment, prospective employment, or continued employment, that an individual submit to or take a lie detector or similar test. An employer who violates this law is guilty of a misdemeanor and subject to a fine not exceeding \$100."