

Date

Store Location

Personal Information

Name

Home Address

City

State

Zip

Phone

Secondary Phone

Email Address

Are You 18 Years or Older?

If No, Please State Your Birthdate

Position You Are Applying For

Salary Desired

Date You Will Be Available To Start

Full-Time

Part-Time

Please specify days/hours available:

Why Would You Like to Work at Rockbrook Camera?

Education and Training

High School

Graduated Yes

No

or Years Completed

College

Degree/Area of Study

Graduated: Yes

No

or Years Completed

Graduate School

Degree/Area of Study

Graduated: Yes

No

or Years Completed

Other

Degree/Area of Study

Graduated: Yes

No

or Years Completed

Employment History

Please list employment starting from your most recent position. Account for any time during this period that you were unemployed by stating the nature of your activities. Please indicate if you were employed under a different name.

May we contact your present employer? Yes No

Employment Date To

Company Name

Address City State Zip

Reason For Leaving

Job Responsibilities

Supervisor's Name Phone

Employment Date To

Company Name

Address City State Zip

Reason For Leaving

Job Responsibilities

Supervisor's Name Phone

Employment Date To

Company Name

Address City State Zip

Reason For Leaving

Job Responsibilities

Supervisor's Name Phone

Employment Date To

Company Name

Address City State Zip

Reason For Leaving

Job Responsibilities

Supervisor's Name Phone

Photographic Training and Experience

Have you ever received training or attended photography classes? Yes No

If yes, please list the name and location of the institution and the subjects covered.

Institution Name Location

Subjects

Institution Name Location

Subjects

Have you ever worked as a professional photographer? Yes No

If yes, please list the type of photography and location where the work was performed:

Sales Training and Experience

Please explain the type of sales training you have had such as retail, telephone, door-to-door, etc.
Include the name of the company, location and date.

Company Location

Type of Sales Date

Company Location

Type of Sales Date

Company Location

Type of Sales Date

Computer and Software Experience

Please indicate computer programs you have experience with and your proficiency

| | | | | |
|-----------------|----------|--------------|----------|---------------|
| Adobe Photoshop | Advanced | Intermediate | Beginner | No Experience |
|-----------------|----------|--------------|----------|---------------|

| | | | | |
|-----------------|----------|--------------|----------|---------------|
| Adobe Lightroom | Advanced | Intermediate | Beginner | No Experience |
|-----------------|----------|--------------|----------|---------------|

List any additional programs you are familiar or experienced with: (Video editing, web platforms, point of sale, etc)

Program Proficiency

Program Proficiency

Personal References

Please do not include relatives or former employers.
List individuals familiar with your qualifications and character to share information about you.

| | |
|-----------------|--------------|
| Name | |
| Current Address | |
| Occupation | Phone Number |
| <hr/> | |
| Name | |
| Current Address | |
| Occupation | Phone Number |
| <hr/> | |
| Name | |
| Current Address | |
| Occupation | Phone Number |
| <hr/> | |

I certify that the information provided by me on this application, and any accompanying resume, notes, and the like, is true, accurate, and complete. I also understand and agree that any false information, misrepresentations, or omissions made by me, whether written or oral, in connection with the application process, may disqualify me for consideration for hiring, or if not discovered until after hiring, may result in my dismissal. Further, I understand and agree that my employment is at-will, and for no definite period, and that my employment may be terminated for any reason, or no reason, at any time, without notice, regardless of the date of payment of my wages and salary. I agree, if employed, to give two weeks' notice of my intention to discontinue employment.

I authorize the company to investigate all information provided and to contact any individual or entity listed,

Applicant's Signature

Date

Email Completed form to tonyfortina@rockbrookcamera.com
or mail to Tony Fortina | 2909 S. 169th St. Plz. Ste 100 | Omaha, NE 68130

Office Use Only

Interviewed by: _____ Date: _____ Hired: YES / NO Full-Time Part-Time
Salary: _____ Approved By: _____ Starting Date: _____