

This company is an equal opportunity employer. We do not discriminate on the basis of race, sex, religion, color, age, national origin or disability. If you require assistance in applying for this job, contact our Corporate Office: (734) 838-6900 | 34224 PLYMOUTH RD. LIVONIA, MI 48150

## PERSONAL

Name, Last	First	Middle	Today's Date
Street Address			Home Phone ( )
City	State	Zip	Work Phone ( )
Position Desired	Location Desired [ ] Livonia, MI [ ] Aurora, IL [ ] Cincinnati, OH		Email
Hours Desired	Day and Time Restrictions		Salary Desired
Are you bound by a non-competition or non-disclosure agreement by any employer? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please attach a copy of this agreement with this application.			Will you work overtime if asked? Yes <input type="checkbox"/> No <input type="checkbox"/>
Emergency Contact Name	Phone ( )		When can you start?
Have you ever applied for employment with us? Yes <input type="checkbox"/> No <input type="checkbox"/>		Do you have any friends or relatives working for us? Yes <input type="checkbox"/> No <input type="checkbox"/>	
If Yes, When? Month/ Year: _____		If yes, who? _____	

## EDUCATION

Name and Location	Course of Study	Years Completed	Did you Graduate?	Degree
College or University 1				
College or University 2				
High School				
Trade or Other Post High School Education				

Please list any Special Training or Skills which may benefit you as an employee. Include any Photography or Sales Skills.

## MILITARY SERVICE

Branch of Service	Describe duties and special training
Period of Active Duty (Month and Year) From To	
Rank at Discharge	
Date of Final Discharge	

## REFERENCES

Name	City/State	Telephone ( )	Relationship	Years Acquainted
Name	City/State	Telephone ( )	Relationship	Years Acquainted
Name	City/State	Telephone ( )	Relationship	Years Acquainted

# EMPLOYMENT HISTORY

Company Name		Employment Dates (Month/Year) From _____
Address		To _____
Name of Supervisor	May we contact Supervisor? Yes <input type="checkbox"/> No <input type="checkbox"/>	Phone Number ( )
Position		Pay Rate
Hours Worked		Monthly Income
Primary Duties and Responsibilities		Reason for Leaving
Company Name		Employment Dates (Month/Year) From _____
Address		To _____
Name of Supervisor	May we contact Supervisor? Yes <input type="checkbox"/> No <input type="checkbox"/>	Phone Number ( )
Position		Pay Rate
Hours Worked		Monthly Income
Primary Duties and Responsibilities		Reason for Leaving
Company Name		Employment Dates (Month/Year) From _____
Address		To _____
Name of Supervisor	May we contact Supervisor? Yes <input type="checkbox"/> No <input type="checkbox"/>	Phone Number ( )
Position		Pay Rate
Hours Worked		Monthly Income
Primary Duties and Responsibilities		Reason for Leaving

# QUESTIONNAIRE

Do you possess a valid Drivers License? Yes <input type="checkbox"/> No <input type="checkbox"/>	Rate your proficiency on the following topics. 5 being the highest.
State _____ DL# _____ Expiration Date _____	E-Commerce Experience 1 2 3 4 5
Do you have reliable transportation? Yes <input type="checkbox"/> No <input type="checkbox"/>	Shopify 1 2 3 4 5
Are you eligible to work in the US? Yes <input type="checkbox"/> No <input type="checkbox"/>	eBay 1 2 3 4 5
Within the past 7 years, have you been convicted of a crime or been re- leased from prison? (neither criminal record nor a conviction will automati- cally bar your from employment) Yes <input type="checkbox"/> No <input type="checkbox"/>	Amazon 1 2 3 4 5
If yes, please explain. _____	Other E-Commerce Platforms 1 2 3 4 5
Have you ever been bonded? Yes <input type="checkbox"/> No <input type="checkbox"/>	HTML 1 2 3 4 5
If yes, please explain. _____	Microsoft Excel 1 2 3 4 5
	Adobe Photoshop 1 2 3 4 5
	Photography Skills 1 2 3 4 5
	Photo Editing 1 2 3 4 5
	Digital Cameras 1 2 3 4 5
	Film / Vintage Cameras 1 2 3 4 5
	Tech Savvy 1 2 3 4 5
	Organized and focused 1 2 3 4 5
	Written and communication skills 1 2 3 4 5
	Ability to work independently 1 2 3 4 5
	Other: _____

# SIGNATURE

The facts set forth in my application for employment are true and complete. I understand that any false statement or omissions of facts on this application, or on any other required documents, may result in denial of employment or discharge.

I hereby give PROCAM the right to make a thorough investigation of my past employment, education and activities. I release from all liability all persons, companies and corporations supplying such information. I further release PROCAM against any liability that might result from making such investigation.

I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between PROCAM and myself. I further understand and agree that if I am hired by PROCAM, the duration of my employment is indefinite and that I am free to terminate my employment at any time, for any reason and that PROCAM is free to do likewise.

I acknowledge that no representative of PROCAM, other than an officer of the company and then only in writing, has any authority to enter any agreement for employment for any specific period of time, or to make any agreement contrary to the forgoing.

Date \_\_\_\_\_ Signature \_\_\_\_\_