

UNITED PAINTING, INC.

APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion, disability or national origin. Consistent with the Americans with Disabilities Act, applicants may request accommodations needed to participate in the application process.

PERSONAL INFORMATION

	Social Security	
Date:	Number:	
Name:		
Last	First	Middle
Present Address:		
Street	City	State Zip
Permanent Address:		
Street	City	State Zip
Phone No.:		
Referred By:		
		Are you 18 years of age or older? <input type="checkbox"/> Yes <input type="checkbox"/> No

EMPLOYMENT DESIRED

Position:	Date You Can Start:	Salary Desired:
If So May We Inquire		
Are You Employed Now? <input type="checkbox"/> Yes <input type="checkbox"/> No		of Your Present Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Ever Applied to this Company Before? <input type="checkbox"/> Yes <input type="checkbox"/> No		Where? _____

EDUCATION	Name and Location of School	Last Year Complete	Did You Graduate	Subjects Studied & Degree(s) Received
Grammar School				
High School				
College				
Trade, Business or Correspondence				

GENERAL

Subjects of Special Study or Research Work _____

Job Related Skills (typing, Driver's License, etc.) _____

(continued on Other Side)

PLEASE COMPLETE IN FULL

FORMER EMPLOYERS

List below your last four employers, starting with the last one

Date Month and Year	Name and Address of Employer	Salary (upon leaving)	Position	Reason for Leaving

REFERENCES

List below three persons not related to you, whom you have known a

Name	Address	Position	Years Acquainted
1			
2			
3			

"UNDER MARYLAND LAW AN EMPLOYER MAY NOT REQUIRE OR DEMAND ANY APPLICANT FOR EMPLOYMENT OR PROSPECTIVE EMPLOYMENT TO SUBMIT TO OR TAKE A POLYGRAPH, LIE DETECTOR OR SIMILAR TEST OR EXAMINATION AS A CONDITION OF EMPLOYMENT, ANY EMPLOYER WHO VIOLATES THIS PROVISION IS GUILTY OF A MISDEMEANOR A

"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 penalties. If you are to be hired by the company, you will be required to attest to your identity and employment eligibility, and to present documents confirming your identity and employment eligibility. You cannot be hired if you cannot comply with

AUTHORIZATION

I certify that the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge and belief. Any false statement, omission, or misrepresentation on this application is sufficient cause for refusal to hire, or discharge, when discovered by the Company.

I understand that any employment is conditioned on a background check. I authorize the Company to thoroughly investigate all statements made in my application or resume, and I authorize my former employers and references to disclose information regarding my former employment and reputation to the Company, without giving my prior notice of such disclosure. In addition, I release and agree to release the Company above from any and all claims, demands or liabilities arising out of or from my employment with the Company.

I understand and agree that nothing contained in this application, or conveyed during any interview, is intended to create an employment contract. I understand and agree that if I am hired, my employment will be "at will" and without fixed term, and may be terminated without prior notice, at the option of either myself or the Company. No promises regarding a permanent position, promotion, or guarantee is binding upon the Company unless made in writing.

If I am offered employment I agree to submit to a medical examination and drug test before starting work. If employed, I also agree to submit to a medical examination or drug test at any time deemed appropriate by the Company and as permitted by law. I consent to the Company's policy that the examining doctor disclose to the Company the results of the examination, which results may be used for employment purposes. I understand that my employment or continued employment, to the extent of my employment, is contingent upon passing a drug test, and if I am hired a condition of my employment.

I understand that filling out this form does not indicate there is a position open and does not obligate the Company to hire. If hired, I agree to abide by the Company work rules, policies and procedures. The Company retains the right to revise its policies or procedures at any time.

Date: _____

Signature: _____