



## APPLICATION FOR FIELD EMPLOYMENT

An Equal Opportunity Employer / Drug Free Business

**Instructions:** This application must be filled out completely and signed to be considered. You are encouraged to attach a résumé. It is our policy to accept applications for open positions only. Applicants who are selected for interviews will be contacted by phone within two weeks of receipt of application materials. This application will remain in active status for 30 days.

Social Security Number (Voluntary now, required upon employment)

Date: \_\_\_\_\_

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Position applying for: \_\_\_\_\_

### Personal Data

Name		How did you learn about the position?	
Street Address		<input type="checkbox"/> Monster.com	<input type="checkbox"/> Major PTG Employee
City, State, ZIP Code		<input type="checkbox"/> CareerBuilder.com	<input type="checkbox"/> Web Page
		<input type="checkbox"/> Employment Security	<input type="checkbox"/> Walk-in
		<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Other _____
Home Telephone ( ) ( )	Mobile Number ( ) ( )	Message Telephone ( ) ( )	Email Address
List other names under which you have attended school, been employed, or been known by:			

**EOE Statement:** Major Painting is an Equal Opportunity Employer. It is the intent and resolve of Major Painting to comply with the requirements and spirit of the law in implementing equal opportunity. In the recruitment, selection, training, utilization, promotion, termination, or any other personnel action, there will be no discrimination on the basis of race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental handicap, or veteran status. Major Painting fully complies with all government requirements for establishing and carrying through such policies. The selection of candidates for all positions will follow our Equal Opportunity policy.

### Education

Have you graduated from high school or received a GED certificate?  Yes  No

Name of High School \_\_\_\_\_ City, State, ZIP \_\_\_\_\_

**Employment Record** List present or most recent experience first. *Statements such as “see résumé” do not substitute for completing any portion of the application.* Attach additional sheets as necessary.

Title	Duties		
Firm Name			
Street Address			
City	State		
Supervisor's Name	Telephone ( )	Starting \$	Ending \$
Dates of Employment (Mo/Yr—Mo/Yr)	Reason for leaving		
Title	Duties		
Firm Name			
Street Address			
City	State		
Supervisor's Name	Telephone( )	Starting \$	Ending \$
Dates of Employment (Mo/Yr—Mo/Yr)	Reason for leaving		
Title	Duties		
Firm Name			
Street Address			
City	State		
Supervisor's Name	Telephone( )	Starting \$	Ending \$
Dates of Employment (Mo/Yr—Mo/Yr)	Reason for leaving		

<b>Professional References</b>			
Name	Address	Telephone ( )	Title
Name	Address	Telephone ( )	Title

<b>Licenses and Certificates:</b> List your professional licenses, permits, and certificates, including First Aid and CPR				
License	Type	State	Effective Date	Expiration Date
License	Type	State	Effective Date	Expiration Date
License	Type	State	Effective Date	Expiration Date

Type of School	Name of School	City, State, ZIP	Degree or Diploma	Major

## **Applicant's Certification and Agreement**

*Please read carefully*

### **ARBITRATION AGREEMENT**

I, the undersigned applicant, and the Company, for and on behalf of itself and all of its employees, mutually agree that in consideration of the company entertaining this application and other consideration that all claims, dispute, differences and controversies between myself and the Company or the Company and me, shall exclusively be resolved and settled through final and binding arbitration. Such claims shall include, but are not limited to employment, civil rights, discrimination and retaliation claims. Arbitration shall exclusively be conducted and administered by the American Arbitration Association and its National Rules for the Resolution of Employment Disputes. The arbitrator may reallocate any administrative fee or cost applicable to the employee under these rules upon a showing by the employee that the cost or administrative fee imposes a prohibitive cost on said employee. The arbitrators shall have the sole and exclusive right to decide and determine all issues of arbitrability and jurisdiction. The parties stipulate and agree that all arbitrations shall be pursuant to the Federal Arbitration Act, and any claim to a right of trial by jury and appeal is waived and judgment upon an Award may be entered in any court. The parties agree that any party who files a judicial or administrative action asserting claims subject to this agreement, and if the other party successfully stays such action or compels arbitration of such claims, the party filing such action shall pay the other party's costs and attorney's fees incurred in seeking such stay and/or compelling arbitration. Should one or more of the provisions of this Agreement be found to be invalid, illegal or unenforceable in any respect, the validity, legality and enforceability of the remaining provisions contained in this Agreement will not be affected. I state that I have been given sufficient time to read the provisions of this Agreement and to ask questions.

### **OTHER AGREEMENTS**

I hereby certify that the information provided in this application and in any accompanying materials is true and complete, and that there is no misrepresentation or falsification in any of the statements or answers to questions. I agree that if investigation discloses any misrepresentation or falsification, such disclosure will constitute grounds for rejection of application or immediate dismissal from employment.

I hereby consent to and authorize any of my former employers to furnish any and all relevant information concerning my previous employment record. In addition, I consent to and authorize the educational institutions that I attended to furnish any and all relevant information concerning my educational background.

I release all parties concerned with any request for information from all claims, liability, and damages for whatever reason arising out of furnishing this information. If employed, I agree that Major Painting may provide references in the future regarding my work history while in their employ.

I understand that my employment is contingent upon providing proof of employment eligibility and identity and I will present the necessary documents when asked.

A photocopy of this release shall have the same effect as the original.

**I have read and understand all of the requirements on this application, including the obligation to resolve disputes through binding arbitration.**

**Printed Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_