

Lamb Painting, LCC
PO Box 306
Spearfish, SD 57783

Application for Employment

(Please Print)

Date You Can Start: _____ Availability: Full Time Part Time Temporary

Date we sent out application: _____

Position applied for: _____ Date: _____

Name _____
(Last) (First) (Middle)

Present Address: _____ City _____ State: ____ Zip code: _____ How long did _____
you lived there Year Month

Previous Address: _____ City _____ State: ____ Zip code: _____ How long did _____
you lived there Year Month

Home Phone #: (_____) _____ Cell phone or other: (_____) _____

Social Security #: ____ - ____ - _____

Are you capable of satisfactorily performing the essential job duties required of the position for which you are applying?
 Yes No

If no, describe limitation: _____

Have you ever been convicted of any misdemeanor or felony in the last seven years: Yes No
If yes, please give the date(s) and details.

Note: Answering "Yes" to these questions does not constitute an automatic bar to employment. Factors such as age and time of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account. (Do not include minor traffic citations and arrests or convictions which have been sealed or expunged under §5 of the South Dakota Criminal Identification Act in answering this question.)

Have you ever used another name? Yes No

Is any additional information relative to change of name, use of assumed name, or nickname necessary to enable a check on your work and educational record? If yes, please explain:

EDUCATION:	Name/Location	Dates from/to	Years completed (circle)
High School:	_____	____/____	<u>9</u> <u>10</u> <u>11</u> <u>12</u>
College(s):	_____	____/____	<u>9</u> <u>10</u> <u>11</u> <u>12</u>
Trade or Correspondence:	_____	____/____	<u>9</u> <u>10</u> <u>11</u> <u>12</u>
Are you studying now?	_____	School Attending: _____	

Please Initial: _____

RECORD OF PREVIOUS EMPLOYMENT

Please list the names of your present or previous employers in chronological order with present or last employer listed first. Be sure to account for all periods of time including military service and any period of unemployment. If self-employed, give Firm name and supply business references. (Add additional page if necessary.)

(1) COMPANY: _____ PHONE (_____) _____ ADDRESS: _____ CITY/STATE: _____ POSITION: _____ DATES FROM: _____ TO _____ FINAL SALARY: _____ REASONS FOR LEAVING: _____ SUPERVISOR'S NAME : _____ TITLE: _____
(2) COMPANY: _____ PHONE (_____) _____ ADDRESS: _____ CITY/STATE: _____ POSITION: _____ DATES FROM: _____ TO _____ FINAL SALARY: _____ REASONS FOR LEAVING: _____ SUPERVISOR'S NAME : _____ TITLE: _____
(3) COMPANY: _____ PHONE (_____) _____ ADDRESS: _____ CITY/STATE: _____ POSITION: _____ DATES FROM: _____ TO _____ FINAL SALARY: _____ REASONS FOR LEAVING: _____ SUPERVISOR'S NAME : _____ TITLE: _____
(4) COMPANY: _____ PHONE (_____) _____ ADDRESS: _____ CITY/STATE: _____ POSITION: _____ DATES FROM: _____ TO _____ FINAL SALARY: _____ REASONS FOR LEAVING: _____ SUPERVISOR'S NAME : _____ TITLE: _____

List any additional information you would like us to consider and indicate any actual experience, special training and qualifications that you have which you feel are relevant to the position for which you are applying:

Please explain and gaps in employment: _____

Please Initial _____

If you have any professional or personal references other than your prior employers mentioned above and excluding relatives, please list them here:

(1) Name: _____ Phone: _____ How Acquainted: _____ How Long: _____

Address (street, city, and state): _____

(2) Name: _____ Phone: _____ How Acquainted: _____ How Long: _____

Address (street, city, and state): _____

(3) Name: _____ Phone: _____ How Acquainted: _____ How Long: _____

Address (street, city, and state): _____

How many days of work have you missed in the last three years due to reasons other than paid holidays and vacations?

Year Number of days

Year Number of days

Year Number of days

PLEASE READ AND SIGN:

I hereby certify that the information contained in this application is true and correct to the best of my knowledge and agree to have any of the statements checked by Lamb Painting. I authorize the references listed above, as well as all other individuals whom Lamb Painting contacts, to provide any and all information concerning my previous employment and any other pertinent information that they may have.

Further, I release all parties and persons from any and all liability for any damages that may result from furnishing to Lamb Painting, as well as from the use or disclosure of such information by Lamb Painting agent, co-workers or representatives. I understand that my misrepresentation, falsification, or material omission of information on this application may result in my failure to receive an offer or, if I am hired, my immediate dismissal from employment.

Lamb Painting is an equal opportunity employer. Lamb Painting does not discriminate in employment and no question on this application is used for the purpose of limiting or excluding and applicant's consideration for employment on a basis prohibited by local, state, or federal law. This application is current for only 90 days. At the conclusion of this time, if I have not heard from employer and still want to be considered for employment it will be necessary to fill out a new application.

PRINT NAME: _____ DATE: _____

APPLICANT'S SIGNATURE: _____

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job related medical condition or handicap, or any other legally protected status.

Put an X in the appropriate

box:

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Have you ever filed an application with us before?

If yes, give date: _____ Yes No

Have you ever been employed with us before?

If yes, give date: _____ Yes No

Are you currently employed?

Yes No

May we contact your present employer?

Yes No

If no, please explain: _____

Yes No

Are you prevented from lawfully becoming employed in the Country because of Visa or Immigration Status?

Yes No

Proof of citizenship or immigration will be required upon employment.

Are you currently on "lay-off" status and subject to recall?

Yes No

Can you travel to another state if a job requires it?

Yes No

Have you ever been convicted of any crime by a civilian or military court?

If yes, please explain: _____

Yes No

It is a requirement of this job we run a criminal background check on you.

Will you comply with us?

Yes No

Do you have relations employed by our company?

Yes No

Have you ever been dismissed or asked to resign from an employer?

If yes, please explain: _____

Yes No

Lamb Painting requires you to have a valid drivers licenses and a dependable vehicle to get to our shop each and every morning.

If you offered this job, will you comply?

Yes No

Lamb Painting requires you to bring your lunch to the job site when you report to work in the morning and you must eat your lunch on the job site.

Will you comply this requirement?

Yes No

Federal law requires you to take a 1/2 hour unpaid lunch break after your first five (5) hours worked.

Will you comply this requirement?

Yes No

It is essential requirement of this job that all employees are capable and willing to work on a 12-inch wide Plank at heights up to and including 25 feet high.

If offered this job will you comply with this requirement?

Yes No

Lamb Painting requires that you never use profanity, bad language, or lewd language on the job site or company premises or at company gatherings. The use of profanity, bad language, or lewd language may cause the termination of your employment.

Will you comply with this requirement?

Yes No

Please Initial _____

What hourly rate do you wish to start at? _____

Why are you interested in working for our company? _____

What didn't you like about your previous job?

Please provide any information about community activities, professional trade or service organizations to which you belong, which you believe may demonstrate your job related abilities. (You may include those which indicate race, color, religion, sex, national origin, age, and handicap.)

How did you hear about us?

I authorize all courts, probation departments, prosecutor offices, boards, employers, educational and credit companies, other institutions and agencies, without exception to furnish the company or its representatives any information any of them have concerning me. I further authorize a check by any consumer agency of my employment history as well as any incidents of employment dishonesty, retail, theft or criminal activity. I understand that my employment and/or retention may be affected in whole or in part from a report received from this agency. I hereby discharge and exonerate the company, its agents and representatives, or any person so furnishing information, from any liability and all liability of every nature and kind arising out of the furnishing, inspection or collection of such documents, records, and other information or the investigation made by the company. A photo static copy of this authorization will be considered as effective and valid as the original. (Wherever legally required, a copy of any credit report and other information will be available upon my request.)

I agree to protect the company's confidential information, trade secrets, client lists, and other proprietary information, and will not reveal such information to anyone at anytime during or after cessation of my employment.

If hired, I understand that for the first 90 days of employment I will be considered an introductory employee, during which I will not be considered a regular full-time employee. An introductory employee is an employee whose performance is being evaluated to determine whether further employment in a specific position or with Lamb Painting is appropriate. I will be considered a regular full-time employee after I have successfully completed this introductory period.

APPLICANT'S SIGNATURE: _____ DATE: _____