

Employment Application

Programs, services and employment are equally available to everyone. Please inform the Human Resources Department if you require reasonable accommodation for the application or interview.	Date of Interview (Month/Day/Year): / /
Applicant Data	Position Applied for:
How were you referred to us:	

Full Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Mobile/Pager/Other: _____ E-mail: _____

Date Available to Start: _____ Social Security Number: - - Salary Requirements: _____

If you are under 18 years of age, can you provide a work permit? Yes No If no, please explain: _____

Date of Birth:

Have you ever worked for this company? Yes No If yes, when? _____

Are you legally allowed to work in the United States? Yes No

Type of employment desired: Full-Time Part-Time Temporary Seasonal

Have you ever pleaded guilty, no contest or been convicted of a crime? Yes No If yes, give dates and details: _____

Answering yes to these questions does not constitute an automatic rejection for employment. Date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be considered.

Driver's license number (if applicable to position): _____ State: _____

Summarize Your Special Skills or Qualifications

Previous Employment (begin with most recent position)

Dates of Employment: From ___/___/___ To ___/___/___ Position(s) Held: _____

Company Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Supervisor: _____ Title: _____

Responsibilities: _____

Starting Salary and Title: _____ Ending Salary and Title: _____

Reason for Leaving: _____

May we contact this employer for a reference? Yes No

Dates of Employment: From ___/___/___ To ___/___/___ Position(s) Held: _____

Company Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Supervisor: _____ Title: _____

Responsibilities: _____

Starting Salary and Title: _____ Ending Salary and Title: _____

Reason for Leaving: _____

May we contact this employer for a reference? Yes No

Dates of Employment: From ___/___/___ To ___/___/___ Position(s) Held: _____

Company Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Supervisor: _____ Title: _____

Responsibilities: _____

Starting Salary and Title: _____ Ending Salary and Title: _____

Reason for Leaving: _____

May we contact this employer for a reference? Yes No

I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, educational, financial and other related matters as may be necessary for an employment decision. I hereby release employers, schools or individuals from all liability when responding to inquiries in connection with my application.

In the event I am employed, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature of Applicant: _____

Date: _____

Maximum Painting, LLC

Job Description: Painter

The purpose of this job description is to communicate the responsibilities and duties associated with the position of PAINTER. While the following information should be considered a comprehensive description of this position, it should also be noted that some responsibilities and duties may not be specifically addressed. Every person is expected to perform any reasonable task or request that is consistent with fulfilling company objectives.

It is imperative that you review these duties, skills and physical requirements closely and that you understand that by signing, you are verifying that you can perform all the duties, have the skills and possess the physical abilities that are necessary to perform the job as described.

ESSENTIAL DUTIES AND RESPONSIBILITIES: (including, but not limited to the below):

- Conduct all business in accordance with company policies and procedures, state and federal laws; e.g., OSHA, ADA, etc.;
- Performs all tasks in a neat and efficient manner. This includes cleaning all brushes, rollers and equipment and returning said equipment to their designated storage facility at the end of each day;
- Uses protective equipment when necessary, following all safety procedures;
- Applies protective and decorative coats of paint, varnish, lacquer, and/or other related materials to interior and exterior surfaces of buildings, furniture, equipment, and other structures;
- Washes, scrapes, sands, torches, and/or smoothes interior and exterior surfaces prior to painting, varnishing, lacquering or applying other related materials;
- Operates compressors, striping machines, sandblasters, spray equipment, and other small power equipment;
- Erects various types of scaffolding, staging, ladders, and planks to reach surfaces of work area for Painters and others;
- Applies paints, stains, surface preparatory materials, and undercoating materials to a variety of surfaces, as appropriate, and according to Materials Safety Data Sheets ensuring compliance with hazardous materials guidelines;
- Identification, safe handling, and appropriate disposal of paints, stains, preparatory and undercoating materials, and other hazardous materials;
- Performs other work duties as directed by supervisor.

ESSENTIAL PHYSICAL REQUIREMENTS: Must meet all essential physical requirements and be able to take direction. (Including, but not limited to the below):

- Stand/be on feet for extended periods of time;
- Bend/Stoop/Squat/Kneel Perform routine painting;
- Pick up debris;
- Climb Stairs Routine painting duties require access;
- Push or Pull Move light furniture, appliances, open and close doors, etc.;
- Reach Above Shoulder Perform routine painting duties;
- Climb Ladders;
- Perform routine painting duties on ground and on ladders or scaffolding;
- Balance on ladders and scaffolding;
- Grasp/Grip/Turning Handle painting tools and equipment;
- Finger Dexterity Handle painting tools and equipment;
- Color vision;
- Lifting/carrying (supplies, paint, equipment, etc.):
 - Over 100 lbs. Rare need (less than 1% of the time);
 - 50 - 75 lbs. Occasional need (1% to 33% of the time);
 - 25 - 50 lbs. Frequent need (33% to 66% of the time);
 - 1 - 25 lbs. Constant need (66% to 100% of the time).

ESSENTIAL ENVIRONMENTAL DEMANDS ON THE JOB: These demands document the environment of specific job sites:

- Work both indoors and outdoors;
- Work in both heat and cold;
- Conditions will generally be dry;
- Hazards will include working above the ground, around hazardous materials;
- Fumes, dust and odors will occur with products used in painting;
- May be required to use safety equipment, such as mask or respirator, while working;
- Noise can be expected from spray guns and other small power equipment.

ESSENTIAL KNOWLEDGE, SKILLS and ABILITIES: (including, but not limited to the below)

- Knowledge of the tools, equipment, materials, and application techniques common to the painting trade.
- Knowledge and skill in hazardous materials handling, application, and disposal.
- Skill in the preparation and application of paints, stains, and surface preparation materials to a wide variety of surfaces

ACKNOWLEDGEMENT

I have read the foregoing job description and understand the responsibilities of the job. I agree that I am able to perform the essential duties of this position.

Employee Name

Employee Signature

Date Signed

The above is intended to describe the general content of and requirements for the performance of this job. It is not to be construed as an exhaustive statement of duties, responsibilities or physical requirements. Nothing in this job description restricts management's right to assign or reassign duties and responsibilities to this job at any time. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

Maximum Painting LLC

Previous Work Experience History

Name: _____	yes	No	Years
• Foreman experience	_____	_____	_____
• OSHA 10 Hour card	_____	_____	_____
• CPR	_____	_____	_____
• Aerial Platform certification	_____	_____	_____
• Vinyl wall covering	_____	_____	_____
• Photo murals	_____	_____	_____
• Wall Talkers	_____	_____	_____
• Graphic paint	_____	_____	_____
• Spray vinyl	_____	_____	_____
• Polymix	_____	_____	_____
• TexCote	_____	_____	_____
• Spray Lacquor	_____	_____	_____
• Spray Polyurethane	_____	_____	_____
• Stain/Varish wood	_____	_____	_____
• Epoxy paints	_____	_____	_____
• Acid stain concrete floors	_____	_____	_____
• Seal concrete floors	_____	_____	_____
• Tnemec coatings	_____	_____	_____
• Block fill	_____	_____	_____
• Paint Bollards	_____	_____	_____
• Bolson chair	_____	_____	_____
• Swing Stage	_____	_____	_____

CONSENT FOR DRUG TESTING

Notice and Authorization for Job Applicant Drug Testing

As a matter of policy and to help ensure a safe work environment free of the use of illegal drugs that may impair the ability to perform the essential functions of the position, Maximum Painting, LLC (**Name of prospective employer, hereafter known as “the Company”**) screens job applicants for the presence of illegal drugs. A negative drug test is a condition of employment and applicants refusing to take a pre-employment drug test will not be considered for employment at the Company. Furthermore, positive test findings will result in any offer of employment being withdrawn (or termination if the results are received after your start date).

A positive test result will disqualify you from employment or consideration from employment at the Company for a period of six(6) months from the date the notice of the positive result was received. Submitting an altered urine sample will be treated as a positive test result.

CONSENT AGREEMENT AND RELEASE OF LIABILITY

I have read, understand, agree, and consent to the above-stated policy of Maximum Painting, LLC.

I **authorize** the Company, its physician(s), nurses, technicians or agents to collect a specimen(s) of my urine for chemical analysis.

I **understand** that decisions regarding my application for employment at the Company will be made from the result of this test.

I **consent** to this test for drugs and authorize the attending physician and testing laboratory to provide test results to the Company.

In consideration for your review of my application, I **hereby release** the Company, its affiliates, agents and employees from any liability resulting from employment decisions made from the results of this test.

Applicant's Signature

Date

Print Name

Social Security Number