



dean baldwin painting, LP

APPLICATION FOR EMPLOYMENT

Please Answer All Questions. Résumés Are Not A Substitute For A Completed Application. Please print clearly

We are an equal opportunity employer. Applicants are considered for positions without regard to race, religion, sex, national origin, age, disability, or any other category protected by applicable federal, state, or local laws.

THIS COMPANY IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT REGARDLESS OF ANY PROVISION IN THIS APPLICATION, IF HIRED, THE COMPANY OR I MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY REASON, WITH OR WITHOUT CAUSE OR NOTICE.

Position Applied For: _____ Name: _____

Telephone Number: () _____ - _____ Alternate or Cellular Telephone Number () _____ - _____

Present Address: _____
Street Apt. or Unit No

City State Zip Code

How long have you lived there _____ / _____ AGE: 18 years old or over? Yes No
Years Months

Past Address: _____
Street Apt. or Unit No

City State Zip Code

How long did you lived there _____ / _____
Years Months

Desired Salary/Hourly Rate _____ Type of employment desired? Full-time Part-time (Specify Hour) _____

Are you willing to work overtime? Yes No Date on which you can start work if hired: ____/____/____

Have you previously applied for employment with this Company? Yes No

If yes, when and where did you apply? _____

Have you ever been employed by this Company? Yes No If Yes, provide:

Date of Employment: ____/____/____ - ____/____/____, _____
Reason for separation

Location: _____
Street City State & Zip Code

Date of Employment: ____/____/____ - ____/____/____, _____
Reason for separation

Location: _____
Street City State & Zip Code

INSTRUCTIONS FOR ANSWERING THE NEXT TWO QUESTIONS

1. All applicants: Do not include convictions that were sealed, eradicated, erased, annulled by a court, or expunged, or convictions that resulted in referral to a diversion program.
2. Arizona, Colorado, District of Columbia, Illinois, Kansas, Minnesota, Missouri, Montana, Nevada, Rhode Island, South Carolina, and Utah applicants: Do not respond to the second question regarding arrests.
3. California applicants: Do not include misdemeanor marijuana-related convictions that are more than two (2) years old or misdemeanor convictions for which probation was successfully completed or otherwise discharged and the case was judicially dismissed.
4. Connecticut applicants: You are not required to disclose the existence of any arrest, criminal charge, or conviction, the records of which have been erased. Criminal records subject to erasure are records pertaining to a finding of delinquency or the fact that a child was a member of a family with service needs, an adjudication as a youthful offender, a criminal charge that has been dismissed or nolle (not prosecuted), a criminal charge for which the person was found not guilty, or a conviction for which the offender received an absolute pardon. Any person whose criminal records have been erased is deemed to have never been arrested within the meaning of the law as it applies to the particular proceedings that have been erased, and may so swear under oath.
5. District of Columbia and Washington applicants: Limit any response to the past ten (10) years.
6. Hawaii applicants: Do not answer the following two questions.
7. Indiana applicants: Regarding arrests limit your response to pending charges for felonies and class A misdemeanors that are less than one (1) year old.
8. Massachusetts applicants: Limit any response regarding misdemeanor convictions to the last five (5) years and to those which were not a first offense for drunkenness, simple assault, speeding, a minor traffic violation or disturbing the peace. Applicants with a sealed record on file with the Massachusetts Commissioner of Probation may answer "No Record" with respect to: 1) all inquiries relating to prior convictions or arrests; 2) misdemeanor convictions older than five (5) years; and 3) first time convictions for simple assault, drunkenness, speeding, minor traffic violations or disturbing the peace.
9. Michigan applicants: Regarding arrests, limit your response to felony arrests awaiting conviction or dismissal.
10. New York applicants: All pending arrests or criminal accusations must be disclosed. You are not required to disclose arrests or criminal accusations that resulted in criminal actions or proceedings which were terminated in your favor. Do not disclose criminal actions or proceedings that were sealed or classified as youthful offender adjudications. An ex-offender who is denied employment may, upon written request, receive a statement of the reason(s) for denial within thirty (30) days of the applicant's request for such information.
11. North Dakota and Oregon applicants: Regarding arrests, limit your response to pending charges that are less than one (1) year old.
12. Utah applicants: Limit any response to felony convictions only. Do not respond to the second question regarding arrests.

Have you ever plead guilty or no contest to, or been convicted of any criminal offense other than the applicable exceptions listed above?

Yes No

Have you ever been arrested for any matters for which you currently are out on bail or on your own recognizance pending trial?

Yes No

CRIMINAL OFFENSES ONLY: If you answered Yes, to either of the above two questions, please provide the date(s) and explain in accordance with the above instructions so that individual circumstances can be considered.

Criminal convictions or arrests will not automatically disqualify an applicant from a particular job. The Company will consider the nature of the crime, its seriousness, the substantial relation to the position's functions and qualifications, the number of occurrences, the applicant's age at the time of the crime, the time elapsed since the crime, the applicant's entire work and educational history, employment references and recommendations, and the business necessity of any exclusion when required by law

Have you ever initiated an act of violence in the workplace? Yes No

If yes, please provide the date(s) and explain so that individual circumstances can be considered. (A "Yes" answer will not necessarily disqualify you from employment.)

List all special technical skills that you feel qualify you for the job for which you are applying (For example, computer programming/language, software, equipment operation, special tools or machines, etc.)

WORK EXPERIENCE:

Please list the names of your present and/or previous employers in chronological order with present or last employer listed first. Account for all periods of time including any period of unemployment. If self-employed, supply firm name and business references. You may include any verifiable work performed on a volunteer basis, internships, or military service. Your failure to completely respond to each inquiry may disqualify you for consideration from employment.

Employer Name: _____ Type of Business: _____

Address: _____ / _____ / _____
Street City State & Zip Code

Telephone () - _____ - _____ Dates Employed: From _____ / _____ / _____ to _____ / _____ / _____

Job Title: _____ Duties: _____

Supervisor's Name: _____ May we contact Yes No If No, why not? _____

Wages: Start _____ Final _____ Reason for Leaving _____

What will this employer say was the reason your employment terminated? _____

How much notice did you give when resigning? _____ if none, explain: _____

Employer Name: _____ Type of Business: _____

Address: _____ / _____ / _____
Street City State & Zip Code

Telephone () - _____ - _____ Dates Employed: From _____ / _____ / _____ to _____ / _____ / _____

Job Title: _____ Duties: _____

Supervisor's Name: _____ May we contact Yes No If No, why not? _____

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Address: _____ / _____ / _____
Street City State & Zip Code

Telephone () - _____ - _____ Dates Employed: From _____ / _____ / _____ to _____ / _____ / _____

Job Title: _____ Duties: _____

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Street City State & Zip Code

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Job Title: _____ Duties: _____

Supervisor's Name: _____ May we contact Yes No If No, why not? _____

Wages: Start _____ Final _____ Reason for Leaving _____

What will this employer say was the reason your employment terminated? _____

How much notice did you give when resigning? _____ if none, explain: _____

RELATED EXPERIENCE:

Years/months Position Company Information/Phone No.

Supervisor's Name: _____ May we contact Yes No If No, why not? _____

Years/months Position Company Information/Phone No.

Supervisor's Name: _____ May we contact Yes No If No, why not? _____

Years/months Position Company Information/Phone No.

Supervisor's Name: _____ May we contact Yes No If No, why not? _____

Years/months Position Company Information/Phone No.

Supervisor's Name: _____ May we contact Yes No If No, why not? _____

REFERENCES:

Please list the names of additional work-related references we may contact. Individuals with no prior work experience may list school or volunteer-related references.

NAME	POSITION	COMPANY	WORK RELATIONSHIP (i.e., supervisor, co-worker)	TELEPHONE

Please list the names of personal references (not previous employers or relatives) who know you well that we may contact.

NAME	OCCUPATION	ADDRESS	TELEPHONE	YEARS KNOWN

EDUCATION:

Education	School Name and Location (Address, City, State)	Course of Study	Graduate?	Years Completed	Degree/Major
High School					
College					
Bus./Tech./Trade or Post College					

Honors Received _____

If applicable, list below any other names by which you have been known which may be necessary to allow us to confirm your work and educational record. For example, change of name, use of an assumed name, nickname, etc.

MILITARY EXPERIENCE:

Branch _____ Active Duty Date: From _____ to _____

Describe your duties and special training: _____

Honorable Discharge: Yes No If No, please explain: _____
(Disclosure of dishonorable or general discharge will not necessarily disqualify you for employment. Failure to disclose may result in application disqualification or employment termination)

Have you ever been given the choice to resign rather than be terminated? Yes No If Yes, how many times? _____

If you answered Yes to any of the above three questions, please explain the circumstances of each occasion.

There are several selection tools and information considerations before a hiring decision can be made. As you are evaluated through the selection process you may be involved with some or all of the selection tools.

Employment Interviews: Several personal and/or telephone interviews may be conducted with you to obtain more detailed information regarding your back ground and qualifications. During your interview you may be questioned on your ability on performing job related functions. If you are given a conditional offer of employment, you may be required to complete a post-job offer medical history questionnaire and/or undergo a medical examination, all information shall be confidential. Some positions may require the applicant to take a physical examination. The company complies with the Americans with Disabilities Act of 1990 ("ADA").

Employment Testing: Various tests may be administered to measure your aptitude and abilities in job-related areas.

I understand and agree that if driving is a requirement of the job for which I am applying, my employment and/or continued employment is contingent on possessing a valid driver's license for the state in which I reside and automobile liability insurance in an amount equal to the minimum required by the state where I reside.

I understand that the Company has established, a drug-free workplace and a drug and/or alcohol testing program consistent with applicable federal, state, and local law. If the Company has such a program and I am offered a conditional offer of employment, I understand that if a pre-employment (post-offer) drug and/or alcohol test is positive, the employment offer shall be withdrawn. I agree to work under the conditions requiring a drug-free workplace, consistent with applicable federal, state, and local law. I also understand that all employees of the location, pursuant to the Company's policy and federal, state, and local law, may be subject to urinalysis and/or blood screening or other medically recognized tests designed to detect the presence of alcohol or illegal or controlled drugs. If employed, I understand that the taking of alcohol and/or drug tests is a condition of continual employment and I agree to undergo alcohol and drug testing consistent with the Company's policies and applicable federal, state, and local law.

If employed by the Company, I understand and agree that the Company, to the extent permitted by federal, state, and local law, may exercise its right, without prior warning or notice, to conduct investigations of property (including, but not limited to, files, lockers, desks, vehicles, and computers) and, in certain circumstances, my personal property.

I understand and agree that as a condition of employment and to the extent permitted by federal, state, and local law, I may be required to sign a confidentiality, restrictive covenant, and/or conflict of interest statement, as well as an agreement to arbitrate.

I certify that all the information on this application, my résumé, or any supporting documents I may present during any interview is and will be complete and accurate to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of any information may result in disqualification from consideration for employment or, if employed, disciplinary action, up to and including immediate dismissal.

I understand that as a condition of employment that **specific training and certification** may be required. Company sponsored training and certifications are conditional to my employment and subject to company reimbursement under the and to the extent permitted by federal, state, and local law. I shall be required to continue my employment for duration of time while maintaining acceptable performance. In the event of termination I understand and agree that I will be required to reimburse in full or partial the employer training and certification fees, travel and lodging expenses. Employer reimbursement shall be calculated through time served. These calculations shall be presented to me beforehand at the time training or certification is required.

The Employee Polygraph Protection Act (EPPA) prohibits most private employers from requiring lie detector tests either for pre-employment screening or during the course of employment, subject to certain exceptions. In addition, more restrictive state laws may apply.

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IF HIRED, I AGREE TO CONFORM TO THE RULES AND REGULATIONS OF THE COMPANY, AND I UNDERSTAND THAT THE COMPANY HAS COMPLETE DISCRETION TO MODIFY SUCH RULES AND REGULATIONS AT ANY TIME, EXCEPT THAT IT WILL NOT MODIFY ITS POLICY OF EMPLOYMENT AT-WILL.

I authorize the Company or its agents to confirm all statements contained in this application and/or résumé as it relates to the position I am seeking and to the extent permitted by federal, state, or local law. I agree to complete any requisite authorization forms for the background investigation.

I authorize and consent to, without reservation, any party or agency contacted by this employer to furnish the above-mentioned information. I hereby release, discharge, and hold harmless, to the extent permitted by federal, state, and local law, any party delivering information to the Company or its duly authorized representative pursuant to this authorization from any liability, claims, charges, or causes of action which I may have as a result of the delivery or disclosure of the above requested information. I hereby release from liability the Company and its representative for seeking such information and all other persons, corporations, or organizations furnishing such information.

If hired by this Company, I understand that I will be required to provide genuine documentation establishing my identity and eligibility to be legally employed in the United States by this Company (Employment Eligibility Verification (I-9) and E-Verify) and I also understand this Company employs only individuals who are legally eligible to work in the United States. . The company may conduct some or all verifications: information checks with the Social Security Administration, criminal courts, federal, state, and county repositories of criminal records, Department of Motor Vehicles, and credit bureaus.

THIS APPLICATION WILL BE CONSIDERED ACTIVE FOR A MAXIMUM OF SIXTY (60) DAYS. IF YOU WISH TO BE CONSIDERED FOR EMPLOYMENT AFTER THAT TIME, YOU MUST REAPPLY.

I CERTIFY THAT ALL OF THE INFORMATION THAT I HAVE PROVIDED ON THIS APPLICATION IS TRUE, ACCURATE, AND COMPLETE.

Applicant Signature: _____ Date: _____ / ____ / _____

Section 107.31

YES

NO

Have you been convicted of any of the following?

Forgery of Certificates, false making of aircraft and other aircraft registration violations

Interference with air navigation

Improper transportation of hazardous material

Aircraft piracy

Interference with flight crew members or flight attendants

Commission of certain crime aboard aircraft in flight

Carrying a weapon or explosive aboard an aircraft

Conveying false information and threats

Aircraft piracy outside the special aircraft jurisdiction of the United States

Lighting violations involving transporting controlled substances

Unlawful entry into an aircraft or airport area that serves air carriers or foreign air carriers contrary to established security requirements

Destruction of an aircraft or aircraft facility

Murder

Assault with intent to murder

Espionage

Sedition

Kidnapping or hostage taking

Treason

Rape or aggravated sexual abuse

Unlawful possession, use, sale, distribution or manufacture of an explosive or weapon

Extortion

Armed Robbery

Distribution of, or intent to distribute, a controlled substance

Felony arson

Conspiracy of attempt to commit any of the aforementioned criminal acts

SIGNATURE: _____

DATE: _____

Sección 107.31

SI NO

Ha sido condenado usted de cualquiera del siguiente?

La falsificación de Certificados, hacer falso de avión y otras infracciones de matrícula de avión

Interferencia con la navegación aérea

El transporte impropio de la materia peligrosa

Piratería de avión

Interferencia con miembros de tripulación o auxiliares de vuelo

La comisión de cierto crimen a bordo de avión en el vuelo

Llevar un arma o el explosivo a bordo de un avión

Transmitir información y amenazas falsas

Piratería de avión fuera de la jurisdicción especial de avión de los Estados Unidos

Que Encienden las infracciones que implica transportar sustancias controladas

La entrada ilegal en un área de avión o aeropuerto que sirve aerolíneas o aerolíneas extranjeras al contrario de requisitos establecidos de seguridad

La destrucción de una facilidad de avión o avión

Asesinato

Asalto con la intención para asesinar

Espionaje

Sedición

El rapto o el rehén que toman

Traición

Viole o el abuso sexual agravado

La posesión ilegal, el uso, la venta, la distribución o fabrica de un explosivo o el arma

Extorsión

Robo armado

La distribución de, o intención para distribuir, una sustancia controlada

Delito de incendio de crimen grave

La conspiración de la tentativa para cometer cualquiera del criminal referido actúa

FIRMA: _____

FETCHA _____