APPLICATION FOR EMPLOYMENT

YOUR NAME_____Today's Date_____
            (Last)   (First)   (Middle)

Address where you may be reached_____

_____

Previous address_____(how long?)_____

Telephone Number (   )_____ E-mail address _____

Person to be contacted in case of emergency _____(phone)(   )_____

For what position(s) are you applying?_____ Full or Part Time _____

Specify what days and hours you are available for work:

Sun. _____ Mon. _____ Tues. _____ Wed. _____ Thurs. _____ Fri. _____ Sat. _____

Are you legally old enough to do the type of work for which you are applying? _____

General Information

Were you employed when you applied with us? _____If yes, why do you want to change employment?
_____

Have you any other employment applications pending? _____   If yes, with what firms?
_____

What is your number one hobby? _____ Others? _____

Do you use a digital camera (NOT a phone)? __(often) __(occasionally) __(rarely)   What kind(s)?
_____

Do you use a camcorder? __(often) __(occasionally) __(rarely) What kind(s)? _____

Do you use a film camera? __(often) __(occasionally) __(rarely) What kind(s)? _____

Do you use a computer? __(often) __(occasionally) __(rarely) What kind(s)? _____

Do you use a wet darkroom? __(color) __(b/w) __(digital)

Can you type?_____ If so, how many words per minute? _____

English is necessary for any sales or service position in our business. Do you speak, read and write fluent

English? _____ Are you conversant in any other languages? If so, which? _____

Do you know of any reason(s) why you would be unable to fulfill the duties of the employment you are

applying for? _____

Can you, and will you, work in a **non smoking** environment? _____

Can you, and will you, work in a **cell phone free** environment?_____

please continue to the next page

Employment History

State fully how you have been previously employed
Begin with your present or most recent employer.

From To mo./yr.	Name of Firm mo./yr.	Address of Firm	Name of Supervisor	Position	Reason for leaving
__/__ __/__	_____ _____	_____ _____	_____ _____	_____ _____	_____ _____
__/__ __/__	_____ _____	_____ _____	_____ _____	_____ _____	_____ _____
__/__ __/__	_____ _____	_____ _____	_____ _____	_____ _____	_____ _____
__/__ __/__	_____ _____	_____ _____	_____ _____	_____ _____	_____ _____
__/__ __/__	_____ _____	_____ _____	_____ _____	_____ _____	_____ _____

How many days work did you miss during the past year? _____

Personal History and References

(Please do not include relatives or former employers)

Name	Occupation	Current Address	Telephone
_____	_____	_____ _____	( )_____
_____	_____	_____ _____	( )_____
_____	_____	_____ _____	( )_____

Have you ever used another name? _____ If so, what? _____
Have you ever been arrested? _____

Photo, Video, and Electronics Training or Experience

1. Have you ever received training or attended photo, video or digital darkroom classes? ___(yes) ___(no).   (If yes, please list when and where.)

Subjects covered	Name and location of facility	Dates	Degree or Diploma?
_____ _____	_____ _____	__/__ __/__	_____ _____
_____ _____	_____ _____	__/__ __/__	_____ _____
_____ _____	_____ _____	__/__ __/__	_____ _____

2. Have you ever worked (professionally) as a photographer or videographer? ___(yes) __(no)

Indicate freelance or name and address of firm	List types of work done	Dates
_____ _____	_____ _____	__/__ __/__
_____ _____	_____ _____	__/__ __/__
_____ _____	_____ _____	__/__ __/__

Abilities

Indicate which skills you have learned to use and are proficient at:

___using a cash register
___using a point of sale system
___shipping via UPS
___dubbing video
___quality control
___framing
___programing VCRs
___public speaking
___Adobe Photoshop©
___desktop publishing
___DVD authoring

___using a photocopier
___using a facsimile
___using e-mail
___website management
___making repairs
___social media
___stock work
___film scanning
___color profiling
___inventory maintenance
___bookeeping

___computer graphics
___customer relations
___Ebay sales
___digital restoration
___training
___marketing
___advertising
___promotion
___telephone sales
___maintenance
___using a multi-line telephone

Education / Training History

Give number of years completed	Name and address of institution	Did you graduate?	Course of study	Indicate Degree
Grammar School Years Completed	_____ _____ _____	___Yes ___No	_____ _____	_____
Jr. High School Years Completed	_____ _____ _____	___Yes ___No	_____ _____	_____
High School Years Completed	_____ _____ _____	___Yes ___No	_____ _____	_____
College Years Completed	_____ _____ _____	___Yes ___No	_____ _____	_____
Graduate School Years Completed	_____ _____ _____	___Yes ___No	_____ _____	_____
Other School Years Completed	_____ _____ _____	___Yes ___No	_____ _____	_____

In the space below, describe yourself as accurately as possible.

_____
_____
_____
_____
_____
_____
_____
_____

If your application is considered favorably,

1. When will you be able to begin working? _____
2. How and when is the best time to reach you? _____

I certify that the information provided by me on this application, and any accompanying resume, notes, and the like, is true, accurate and complete. I also understand and agree that any false information, misrepresentations, or omissions made by me, whether written or oral, in connection with the application process, may disqualify me from consideration for hire, or if not discovered until after hiring, may result in my dismissal.

Further, I understand and agree that my employment is at-will, and for no definite period, and that my employment may be terminated for any reason, or no reason,at any time, without notice, regardless of the date of payment of my wages and salary.

I agree, if employed, to give two (2) weeks notice of my intention to discontinue employment.

I authorize the company to investigate all information provided and to contact any individual or entity listed, to verify the information provided, and/or to request a reference.

Signature of Applicant _____