



Employment Application

Reason for Leaving: _____

Name of Employer: _____ Job Title: _____

Address: _____ Phone: _____

Supervisor Name and Title: _____

Dates Employed: _____ Salary: _____

Describe the Work Performed: _____

Reason for Leaving: _____

Name of Employer: _____ Job Title: _____

Address: _____ Phone: _____

Supervisor Name and Title: _____

Dates Employed: _____ Salary: _____

Describe the Work Performed: _____

Reason for Leaving: _____

Education:

	Name of School	Course of Study	No. of Years Completed	Diploma/Degree
High School	_____	_____	_____	_____
College	_____	_____	_____	_____
Vocational or Trade	_____	_____	_____	_____
Graduate	_____	_____	_____	_____
Other	_____	_____	_____	_____

Rate your experience level in the following paint fields:

	No experience	Beginner	Intermediate	Advanced	Expert
Residential					
Commercial					
Industrial					
Estimating					
Paper Hanging					

Bella's Army is an equal opportunity employer.

Bella's Army
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 1321 Stanley Drive
 Verona, PA 15147
 (412) 378-1006



Employment Application

Spray					
Roller					
Climbing ladders (up to 40 ft.)					
Carrying ladders (up to 40 ft.)					

References:

List at least 2 professional and 1 unrelated personal reference.

Name	Phone	Years Known	Relationship

Acknowledgement:

- I understand and agree that any misrepresentation by me on this application will be sufficient cause for cancellation of this application and/or termination from this employer's service.
- I give Bella's Army the right to investigate all references and to secure additional information about me, if job-related. I hereby release from liability Bella's Army and its representatives for seeking such information and other persons, corporations or organizations for furnishing such information.
- Bella's Army is an equal opportunity employer and all qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability status, protected veteran status, or any other characteristic protected by law.
- I understand that it is Bella's Army's policy not to refuse to hire a qualified individual with a disability because of the applicant's need for an accommodation as required by the Americans with Disabilities Act.
- This application is valid for 60 days. At the conclusion of 60 days, if Bella's Army has not indicated otherwise, it will be necessary for the applicant to complete a new application.
- I understand that I am free to resign at any time and Bella's Army reserves the right to terminate my employment with or without cause and without prior notice. I understand that no representative of the employer has the authority to make assurances to the contrary.

Applicant Signature: _____

Date: _____

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