

Starving Artist Studio

Please print all information requested except for signature Employment Application

Name: _____ Date _____
First Last Middle

Address _____
City State Zip

Telephone (_____) _____
 Position applied for _____
 Salary desired _____
 Can you work nights? _____

Do you have a current Driver's License _____
 If under 18, list age _____

Check Days/hours available to work
 No preference _____ Thursday _____
 Monday _____ Friday _____
 Tuesday _____ Saturday _____
 Wednesday _____ Sunday _____

Employment desired: [] FULL-TIME ONLY [] PART-TIME ONLY [] FULL OR PART-TIME [] SEASONAL

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION	NUMBER OF YEARS COMPLETED	MAJOR DEGREE
High School				
College				
Business or Trade School				
Professional School				

What skills/experience do you bring to us?

What is your definition of excellent customer service?

WORK EXPERIENCE Please list your work experience beginning with your most recent job held.

Name of employer	Name of last supervisor	Employment dates	Pay or salary
Address		From:	Start:
City, State, Zip		To:	Final:
Phone number	Your last job title:		
Reason for leaving (be specific):			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company:			

Name of employer	Name of last supervisor	Employment dates	Pay or salary
Address		From:	Start:
City, State, Zip		To:	Final:
Phone number	Your last job title:		
Reason for leaving (be specific):			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company:			

All applicants may be tested for illegal drugs

May we contact your present employer? [] Yes [] No

List 2 References other than relatives or previous employers:

1.	2.
Name:	Name:
Position:	Position:
Company:	Company:
Address:	Address:
Phone:	Phone:

APPLICATION FORM WAIVER

In exchange for the consideration of my job application by The Starving Artist Studio LLC, I agree that: Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, regardless of the contents of employee handbooks, manuals, benefit plans, policy statements, or any other form of written procedure shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Starving Artist Studio LLC, or otherwise to change in any respect the employment-at-will relationship. Both the applicant and Starving Artist Studio LLC may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give Starving Artist Studio LLC permission to contact schools, previous employers (unless otherwise indicated), and references, hereby releasing Starving Artist Studio LLC from any liability.

I further understand that my employment with the Company shall be probationary for a period of sixty (60) days, and further that any time during the probationary period or thereafter, my employment relationship with the Company is terminable at will for any reason by either party.

Signature of application _____ Date: _____

This Company is an equal opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business