	Star	ving A	rtist St	tudio			
	Please print all information i	requested excep	ot for signature	Employme	nt Application		
					Date		
Name:							
First	Last		Mid	ldle			
Address							
, taa1000		City		State	Z	Zip	
					e a current Dr		ense
Telephone ()					list age		
Position applied for			_		s/hours availa		
Salary desired					nce ]		
Can you work nights? _						Friday Saturday	
				Wednesday			
				vveuriesuay		ouriday	
Employment desired: [	] FULL-TIME ONLY [ ]	PART-TIME	ONLY[]FL	JLL OR PAF	RT-TIME []	SEASON	AL
TYPE OF SCHOOL	NAME OF SCHOOL	LOCA	TION	NUMBER	OF YEARS	MAJO	R DEGREE
2 0. 00.1002	7.0 MINE 01 0011002	200/			PLETED	1111 100	BEGINEE
High School							
College							
Business or Trade School							
Professional School							
What skills/experience of the skills/experienc	do you bring to us?  of excellent customer serv	rice?					
WORK EXPERIENCE	Please list your work exp	perience beg	inning with y	our most re	cent job held.		
Name of employer			Name of las	t supervisor	Employmen	it dates	Pay or salary
Address							
					From:		Start:
City, State, Zip					To:		Final:
Phone number			Your last job title:				
Reason for leaving (be specifi	c:						
List the jobs you held, duties p	performed, skills used or learne	d, advancemen	ts or promotions	s while you wor	ked at this compa	any:	
Name of employer			Name of las	st supervisor	Employmer	t dates	Pay or salary
Address					From:		Start:
City, State, Zip					To:		Final:
Phone number			Your last job title:				
Reason for leaving (be specifi	C:						
List the jobs you held, duties p	performed, skills used or learne	d, advancement	ts or promotions	s while you wor	ked at this compa	any:	
	All applica	ants may be	tested for ille	egal drugs			

May we contact your present employer? [ ] Yes [ ] No						
: _						
2.						
Name:						
Position:						
Company:						
Address:						
Phone:						
FORM WAIVER						
e Starving Artist Studio LLC, I agree that: It entry into any type of employment relationship, either in the Intents of employee handbooks, manuals, benefit plans, Ill serve to create an actual or implied contract of employment, It Studio LLC, or otherwise to change in any respect the Intentional Studio LLC may end the employment relationship at Inderstand that the Company may unilaterally change or I ges include reduction in benefits. I understand that the misrepresentation or omission Intentional Studio LLC I hereby give Starving Artist Studio LLC I herewise indicated), and references, hereby releasing						
t entry into any type of employment relationship, either in the ontents of employee handbooks, manuals, benefit plans, II serve to create an actual or implied contract of employment, t Studio LLC, or otherwise to change in any respect the ring Artist Studio LLC may end the employment relationship at inderstand that the Company may unilaterally change or ges include reduction in benefits.  plication. I understand that the misrepresentation or omission my previous notice. I hereby give Starving Artist Studio LLC						

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