

# Moah's Art

#### **Application For Employment**

| Please   | Tell Us About You   | rself      |
|--|---------------------|------------|
|  | Middle I First      | : <u> </u> |
|  | Other Phone (cell): |            |
| <ul> <li>Check or fill in appropr</li> <li>Do you have a re</li> <li>Are you eligible</li> <li>Have you ever b</li> <li>What wage are y</li> </ul> |                     |            |

# **Availability**

|      | MON | TUES | WED | THU | FRI | SAT |
|------|-----|------|-----|-----|-----|-----|
| FROM |     |      |     |     |     |     |
| OT   |     |      |     |     |     |     |

|            | TO                               |           |    |         |   |   |
|------------|----------------------------------|-----------|----|---------|---|---|
| Check one: | Summer                           | School Ye | ar | All Yea | r | _ |
|            | umber of hours<br>umber of hours |           | k: |         |   |   |

# **Employment History**

 ${\bf PLEASE\ LIST\ YOUR\ THREE\ MOST\ RECENT\ JOBS\ (including\ babysitting,\ or\ volunteer\ work):}$ 

|    | Employed<br>From                | То | Name & Address of Employer | Phone # | Supervisor | Earnings | Reason for<br>Leaving |
|----|---------------------------------|----|----------------------------|---------|------------|----------|-----------------------|
|    |                                 |    |                            |         |            |          |                       |
|    |                                 |    |                            |         |            |          |                       |
|    |                                 |    |                            |         |            |          |                       |
|    |                                 |    |                            |         |            |          |                       |
|    |                                 |    |                            |         |            |          |                       |
|    |                                 |    |                            |         |            |          |                       |
| Jo | Job skills acquired:            |    |                            |         |            |          |                       |
| C  | Can we contact these employers? |    |                            |         |            |          |                       |

|                  |      | Education |                   |              |
|------------------|------|-----------|-------------------|--------------|
|                  | Name | Location  | Did you Graduate? | Degree/Major |
| High<br>School   |      |           |                   |              |
| College/<br>Tech |      |           |                   |              |

| Personal Background   |
|---|
| What are your interests and activities?                               |
| Please list awards and/or leadership positions held (work or school): |
|   |
| Do you have experience with children? If so please list:              |
|   |
|   |

#### **Personal References**

PLEASE PROVIDE THREE REFERENCES TO WHOM YOU HAVE BEEN ACCOUNTABLE. (please no more than one family member)

| Name | Address | Phone # | Relation | Years<br>Known |
|------|---------|---------|----------|----------------|
|      |         |         |          |                |
|      |         |         |          |                |
|      |         |         |          |                |
|      |         |         |          |                |
|      |         |         |          |                |
|      |         |         |          |                |

### **Please Read Carefully & Sign**

| the best of my knowl | cation, I certify: That this application is complete and accurated and that I have not made any attempt to conceal infor could be cause for dismissal. |  |
|----------------------|--|--|
| Date                 | Applicant Signature  |  |

#### INTERNAL USE ONLY

| DATE | ACTION |  |
|------|--------|--|
|      |        |  |
|      |        |  |
|      |        |  |
|      |        |  |
|      |        |  |
|      |        |  |
|      |        |  |
|      |        |  |
|      |        |  |
|      |        |  |
|      |        |  |