



# Absolute Color

5810 Windfern • Houston, TX 77041

PH: 713.996.0202 • FX:713.996.0203

## APPLICATION FOR EMPLOYMENT

### An Equal Opportunity Employer

We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability or military status. It is our intention that all qualified applicants are given equal opportunity and that selection decisions be based on job related factors.

Answer each question fully and accurately. No action can be taken on this application until you have answered all questions. Use blank paper if you do not have enough room on this application. **PLEASE PRINT**, except for signature on back of application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based on non-job-related information.

Position Applying For: \_\_\_\_\_ Today's Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Are you seeking: Full-time  Part-time  Temporary  employment? Date available: \_\_\_\_/\_\_\_\_/\_\_\_\_

Working Hours: From \_\_\_\_\_ To \_\_\_\_\_ Working Days (circle): M T W Th. F S Sun

Applicant's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ St: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number (\_\_\_\_) \_\_\_\_-\_\_\_\_ Best time to call you at home is: \_\_\_\_\_

Social Security Number (optional): \_\_\_\_-\_\_\_\_-\_\_\_\_ Salary or Wage desired: \_\_\_\_\_

Have you been employed by our company before? Yes  No  If yes, when? \_\_\_\_\_

Have you ever applied for employment here before? Yes  No  If yes, when? \_\_\_\_\_

Are you 18 years of age or older? Yes  No  If hired, you may be required to submit proof of age.

If hired, can you show proof you are eligible to work in the United States? Yes  No

Have you ever been, convicted or pled guilty or no contest, to a felony offense? Yes  No

(IMPORTANT: For purposes of employment with this Company, "convictions" include sentenced to confinement, paid fine, time served, placed on probation (including deferred adjudication) and court ordered restitution.)

If yes, please explain: \_\_\_\_\_

(A yes answer does not automatically disqualify you from employment, since the nature of the offense, date, and job which you are applying for is considered.)

Will you work overtime if required: Yes  No  (Availability for overtime is a factor in the hiring decision.)

Are you presently employed? Yes  No  If yes, where? \_\_\_\_\_

If yes, can we call you at work: Yes  No  If yes, phone number: \_\_\_\_\_

Are you on a layoff and subject to recall? Yes  No

If yes, please give name Employer's Name: \_\_\_\_\_

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**Previous Employers (List current or most recent position first)**

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(Account for all periods of time including any periods of unemployment. If self-employed, give firm name and supply business references.)

Name of Employer: \_\_\_\_\_ Dates from: \_\_\_\_\_ to \_\_\_\_\_

Address: \_\_\_\_\_

Position held: \_\_\_\_\_ Salary: Start \_\_\_\_\_ End \_\_\_\_\_

Describe duties: \_\_\_\_\_

Reason(s) for Leaving: \_\_\_\_\_

Name of Employer: \_\_\_\_\_ Dates from: \_\_\_\_\_ to \_\_\_\_\_

Address: \_\_\_\_\_

Position held: \_\_\_\_\_ Salary: Start \_\_\_\_\_ End \_\_\_\_\_

Describe duties: \_\_\_\_\_

Reason(s) for Leaving: \_\_\_\_\_

Name of Employer: \_\_\_\_\_ Dates from: \_\_\_\_\_ to \_\_\_\_\_

Address: \_\_\_\_\_

Position held: \_\_\_\_\_ Salary: Start \_\_\_\_\_ End \_\_\_\_\_

Describe duties: \_\_\_\_\_

Reason(s) for Leaving: \_\_\_\_\_

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**Military Service**

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Are you a Veteran: Yes  No

If yes, please give dates of service. Dates: \_\_\_\_\_ to \_\_\_\_\_

Last Rank: \_\_\_\_\_

Please list any special skills or training: \_\_\_\_\_

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**Educational Information**

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List Name and Address of Schools:

High School or GED: \_\_\_\_\_ Years completed: \_\_\_\_\_  
\_\_\_\_\_ Diploma/Degree: \_\_\_\_\_

College/University: \_\_\_\_\_ Years completed: \_\_\_\_\_  
\_\_\_\_\_ Diploma/Degree: \_\_\_\_\_

Business/Technical School: \_\_\_\_\_ Years completed: \_\_\_\_\_  
\_\_\_\_\_ Diploma/Degree: \_\_\_\_\_

Other: \_\_\_\_\_

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**Special Skills**

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What skills or additional training do you have that are related to the job for which you are applying: \_\_\_\_\_

What machines or equipment can you operate that are related to the job for which you are applying: \_\_\_\_\_

For driving jobs ONLY: Do you have a valid drivers license? Yes  No  Exp. Date: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_ Class: \_\_\_\_\_

Are there any restrictions on your driver's license? Yes  No  Explain: \_\_\_\_\_

Have you had your driver's license suspended or revoked in the last three years: Yes  No

If yes, give details: \_\_\_\_\_

List professional, trade, business or civic activities and offices held: \_\_\_\_\_

How many days of work have you missed during the past year (excluding absences due to disability and those covered by FMLA)? \_\_\_\_\_

Please list any other skill or training that would be relevant for the position for which you are applying: \_\_\_\_\_

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**Other References (Personal, Professional and/or Academic)**

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Have you worked or attended school under any other name? Yes  No

If yes, give names: \_\_\_\_\_

Are you presently employed? Yes  No

Permission is granted to contact current employer Yes  No

If yes, whom do you suggest we contact? \_\_\_\_\_

Have you ever been fired or asked to resign? Yes  No

If yes, please explain: \_\_\_\_\_

Give three references (name, address, and phone number), not relatives or former employers:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Permission is granted to contact the above references, other than current employer Yes  No

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**Applicant's Acknowledgement & Statement**

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I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I understand that the Employer is an equal opportunity employer. The employer does not discriminate in employment and no questions on this application is used for the purpose of limiting or excluding applicant's consideration for employment on a basis prohibited by local, state or federal law.

I give the Employer the right to investigate all references and to secure additional information about me, if job related. I hereby release from liability the Employer and its representatives from seeking information and all other persons, corporations or organizations furnishing such information. I also authorize whether listed or not, any person, school, current employer, past employer and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in makes such statements.

I also understand that should I be employed by the Employer, I will be required, in accordance with the Immigration Reform Control Act of 1986 (IRCA), to provide on my first day of employment documents providing proof of my identity and employment eligibility status. I acknowledge that this verification is a condition of employment and that failure to comply will void my offer of employment.

I understand that the Employer's place of business is a drug free environment, as such, I may be required to successfully pass a drug screening examination. I hereby consent to a pre- and post employment drug screen as a condition of employment, if required.

**I understand that this application or subsequent employment does not create a contract of employment nor guarantee employment for any period of time. If employed, I understand that I have been hired 'at the will' of the employer and my employment may be terminated at any time, with or without cause and with or without notice.**

I, \_\_\_\_\_ agree to immediately notify the Employer if I am convicted of, receive deferred adjudication in, or otherwise plead guilty or no contest to a felony, or any crime involving dishonesty or a breach of trust while my application is pending or during my period of employment, if hired.

I have read, understand and by my signature consent to these statements.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

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This application for employment will remain active for one year from date of completion.