



# Bumblebee Painters LLC

605 W. State St. - Suite 2  
 Ithaca, New York 14850  
 (607) 273-6521

## Application For Employment

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ Date: \_\_\_\_\_  
 Phone No.: \_\_\_\_\_ Email: \_\_\_\_\_  
 Are you Employed now? \_\_\_\_\_ If so, may we inquire of your present employer? \_\_\_\_\_  
 Do you have reliable transportation? \_\_\_\_\_ Are you allergic to bees? \_\_\_\_\_  
 Do you have a fear of heights? \_\_\_\_\_

### Education History

High School: \_\_\_\_\_ How many Years Attended? \_\_\_\_\_ Graduate? \_\_\_\_\_  
 College: \_\_\_\_\_ How many Years Attended? \_\_\_\_\_ Graduate? \_\_\_\_\_  
 Other: \_\_\_\_\_ How many Years Attended? \_\_\_\_\_ Graduate? \_\_\_\_\_  
 Military Service? \_\_\_\_\_ Years and Rank: \_\_\_\_\_  
 Special Work Experience or Extra Training: \_\_\_\_\_  
 \_\_\_\_\_ (use back if necessary)

### Employment History List last 4 employers starting with the most recent one first

Month & Year	Name & City of Employer	Salary	Position	Reason for Leaving
From:				
To:				
From:				
To:				
From:				
To:				
From:				
To:				

### References Give the names of three people not related to you who we may contact

Name	City	Phone No.	Relationship to Applicant

### Authorization

"I certify that the facts contained in this application are true and complete to the best of my knowledge and I understand that, if employed, falsified statements on this application shall be grounds for dismissal.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_