



**HotShot Pool Finishes**  
 Hamburg, NY  
[info@hotshotpoolfinishes.com](mailto:info@hotshotpoolfinishes.com)  
**716.202.1616**

APPLICATION FOR EMPLOYMENT

NAME \_\_\_\_\_  
 LAST FIRST MIDDLE

PRESENT ADDRESS \_\_\_\_\_  
 STREET CITY STATE ZIP CODE

PHONE \_\_\_\_\_ SOCIAL SECURITY NUMBER \_\_\_\_\_  
 REFERRED BY: \_\_\_\_\_

EMPLOYMENT DESIRED

POSITION \_\_\_\_\_ WHEN CAN YOU START \_\_\_\_\_ SALARY DESIRED \_\_\_\_\_

DO YOU HAVE A CURRENT VALID DRIVERS LICENSE? \_\_\_\_\_ LICENSE CLASS? \_\_\_\_\_

ARE YOU APPLYING FOR PART TIME OR FULL TIME POSITION? \_\_\_\_\_

WHAT HOURS ARE YOU AVAILABLE? \_\_\_\_\_

PLEASE GIVE DETAILS IF ANY: \_\_\_\_\_

ARE YOU EMPLOYED NOW? \_\_\_\_\_ IF SO, PLEASE SIGN HERE: \_\_\_\_\_

MAY WE DO A BACKGROUND CHECK? \_\_\_\_\_ IF SO, PLEASE SIGN HERE: \_\_\_\_\_

EVER APPLIED TO THIS COMPANY BEFORE? \_\_\_\_\_ LOCATION \_\_\_\_\_ WHEN? \_\_\_\_\_

EDUCATION	NAME & LOCATION	# OF YEARS ATTENDED	SUBJECTS STUDIED
HIGH SCHOOL			
COLLEGE			
TRADE BUSINESS OR CORRESPONDENCE SCHOOL			

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

US MILITARY SERVICE? \_\_\_\_\_ RANK \_\_\_\_\_



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REFERENCES: NAME THREE PERSONS NOT RELATED TO YOU WHOM YOU HAVE KNOWN AT LEAST ONE YEAR

NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED

FORMER EMPLOYERS (LIST FOUR EMPLOYERS, STARTING WITH LAST ONE FIRST)

START & FINISH DATES	NAME & ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING

DESCRIBE NATURE OF WORK PERFORMED FOR ABOVE JOBS \_\_\_\_\_  
 \_\_\_\_\_

HAVE YOU HAD ANY PREVIOUS INJURIES? \_\_\_\_\_

DO YOU HAVE ANY PHYSICAL, MENTAL OR MEDICAL IMPAIRMENT, WHICH MAY PREVENT YOU FROM PERFORMING IN A REASONABLE MANNER, THE ACTIVITIES INVOLVED IN THE JOB OR OCCUPATION FOR WHICH YOU APPLIED? \_\_\_\_\_  
 \_\_\_\_\_

WE ARE AN EQUAL OPPORTUNITY EMPLOYMENT COMPANY; WE ARE DEDICATED TO A POLICY OF NON-DISCRIMINATION IN EMPLOYMENT ON ANY BASIS INCLUDING RACE, CREED, COLOR, AGE, SEX, RELIGION, NATIONAL ORIGIN, DISABILITY OR ARREST RECORD.

I HEREBY GIVE AUTHORIZATION TO HOTSHOT POOL FINISHES TO CHECK THE REFERENCES GIVEN IN THIS APPLICATION I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR WILL NOT BE INTERPRETED IN MY FAVOR. DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

DO NOT WRITE BELOW THIS LINE	
INTERVIEWED BY: _____	DATE: _____
REMARKS _____	
HIRED _____ FOR DEPT _____	POSITION _____ WILL REPORT _____ SALARY/WAGE _____