

# PAINT FORCE

915 Tunnel Road Asheville NC 28805

828.258.2040 Fax 828.232.1979

[www.thepaintforce.com](http://www.thepaintforce.com)

## Why Work for Paint Force?

### Our Mission:

To build long lasting relationships with our customers, provide opportunities for our employees, and make a difference in our community.

In order to accomplish our mission, we need to hire individuals who understand or can learn what professionalism, integrity and performance mean as an individual, and as a team member.

We provide a stable and personal growth oriented work place for our employees.

Full time employees at Paint Force, Inc. enjoy great wages and benefits that include- paid vacations, bonuses, company work clothing, and work year round.

We provide a safe workplace and utilize safe and up to date equipment.

Paint Force, Inc. is a fun place to work and a place where your ideas and hard work are warmly received.

If you are looking for a solid employment opportunity in the painting industry, please submit your application to our office at 915 Tunnel Road Asheville, NC 28805.

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# Hiring Policies

We hire applicants solely based upon merit. We do not discriminate on the basis of race, sex, age, national origin, disability or any other protected status.

Applications remain on file for 90 days. It is the applicant's responsibility to keep our administrative staff informed of his/her availability.

Applications are accepted by mail or may be taken to our office. We hire based on work experience, references and personal contact with individuals so that we can make sound business judgments as to the most qualified applicants. Any applicant who falsifies or omits information on the application is disqualified from being hired. If the employee has been hired before falsification or omission is discovered, he or she is subject to termination.

We base our hiring decisions on a variety of factors, including skills and ability to perform the job, prior employment with us, employment references as to character and willingness to work, willingness to accept the offered hourly wage, and personal interviews.

Full time employees are expected to work only for Paint Force, Inc. and state that any other employer will not employ them while they work for Paint Force, Inc.

**PAINT FORCE**

Employment Application

Name of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Social Security Number \_\_\_\_\_ Birthdate \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone number \_\_\_\_\_ E-mail \_\_\_\_\_ Fax \_\_\_\_\_

Do you have a driver's license? Yes \_\_\_\_\_ No \_\_\_\_\_

Driver's license number \_\_\_\_\_ State \_\_\_\_\_

Have you ever been convicted of a crime? Yes \_\_\_\_\_ No \_\_\_\_\_ Where? \_\_\_\_\_

If yes please explain \_\_\_\_\_

\_\_\_\_\_

Position applying for \_\_\_\_\_ Salary Required \_\_\_\_\_

How did you here about Paint Force? \_\_\_\_\_

Did you graduate High School? \_\_\_\_\_ College? \_\_\_\_\_ Technical School? \_\_\_\_\_

Do you have transportation? Yes \_\_\_\_\_ No \_\_\_\_\_

*Previous Employment*

*List your current or most recent employment first.*

Current Employer \_\_\_\_\_ City & State \_\_\_\_\_

Telephone \_\_\_\_\_ Supervisor \_\_\_\_\_ Your Position \_\_\_\_\_

Dates of Employment \_\_\_\_\_

Previous Employer \_\_\_\_\_ City & State \_\_\_\_\_

Telephone \_\_\_\_\_ Supervisor \_\_\_\_\_ Your Position \_\_\_\_\_

Dates of Employment \_\_\_\_\_

## Employment Application

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*Skill Assessment*

Are you presently working? Yes \_\_\_\_\_ No \_\_\_\_\_

Can you replace windows? Yes \_\_\_\_\_ No \_\_\_\_\_

Can you move a 32 foot ladder? Yes \_\_\_\_\_ No \_\_\_\_\_

Can you tape sheetrock? Yes \_\_\_\_\_ No \_\_\_\_\_

Can you patch drywall? Yes \_\_\_\_\_ No \_\_\_\_\_

Can you spray an airless? Yes \_\_\_\_\_ No \_\_\_\_\_ HVLP? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you been in a situation when you had to manage people? Yes \_\_\_\_\_  
No \_\_\_\_\_

Do you want to be in a position to manage others? Yes \_\_\_\_\_ No \_\_\_\_\_

What do you like to do most in the painting field? \_\_\_\_\_

\_\_\_\_\_

What is your strongest asset as a painter? \_\_\_\_\_

\_\_\_\_\_

What is your least favorite task in the painting field? \_\_\_\_\_

\_\_\_\_\_

What do you like to do when you are not working? \_\_\_\_\_

\_\_\_\_\_

How long does it take you to paint a window 6 over 6? \_\_\_\_\_

How long does it take you to paint a window 12over 12? \_\_\_\_\_

How much square footage of siding can you paint in an hour? \_\_\_\_\_

How many doors can you paint in an hour? \_\_\_\_\_ day? \_\_\_\_\_

What would you like to know more about in the painting field? \_\_\_\_\_

\_\_\_\_\_

## **Employment Application**

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*cont*

What do you see yourself doing in 3 years? \_\_\_\_\_

**What can you contribute to Paint Force?** \_\_\_\_\_

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**Employee compensation is based on:**

**Product knowledge**

**Technical knowledge**

**Productivity**

**Willingness and capability to manage or work with others.**

**Wage increases are based upon the increase in knowledge, productivity, or the ability to manage others. What are you going to do to work toward a pay increase?**

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**Release Authorization**

I. In connection with my application for employment, I understand that an investigative consumer report may be requested that will include information as to my character, work habits, performance, and experience, along with reason for termination of past employment. I understand that as directed by company policy and consistent with the job described, you may be requesting information from public and private sources about my workers compensation injuries, driving record, court record, education, credentials, credit and references.

II. Medical and worker's compensation information will only be requested in compliance with the Federal Americans with Disabilities Act (ADA) and / or any other applicable state laws. According to the Fair Credit Reporting Act, I am entitled to know if any employment is denied because of information obtained by my prospective employer from a consumer reporting agency. If so, I will be notified and given the name and address of the agency or the source which provided the information.

III. I acknowledge that a telephone facsimile (FAX) or photographic copy shall be as valid as the original.

IV. I hereby authorize, without reservation, any law enforcement agency, institution, information service bureau, school, employer, reference or insurance company, to furnish the information described in Section I.

Please sign here \_\_\_\_\_ Date \_\_\_\_\_