



# Employment Application

EMAIL APPLICATION TO: [mclaughlinstudiosmusic@gmail.com](mailto:mclaughlinstudiosmusic@gmail.com)

Programs, services and employment are equally available to everyone. Please inform us if you require reasonable accommodation for the application or interview.

Date of Review (Month/Day/Year) \_\_\_\_\_

### Applicant Data

Position Applied for: \_\_\_\_\_

How were you referred to us: \_\_\_\_\_

Full Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Date Available to Start: \_\_\_\_\_ Social Security No: \_\_\_\_\_

Salary Requirement: \_\_\_\_\_

If you are under 18 and we require a work permit, can you furnish one?  Yes  No

If no, please explain: \_\_\_\_\_

Have you ever worked for this company?  Yes  No

If yes, when? \_\_\_\_\_

Are you a citizen of the United States?  Yes  No



# Music Dance Theatre Arts

3470 Swetzer Road, Loomis, CA 95650 916-652-6377 www.mclaughlinstudios.com

If not, are you legally allowed to work in the United States?  Yes  No

Type of employment desired? \_\_\_\_\_

Have you ever pleaded "guilty," "no contest," or been convicted of a crime for which you have not received a pardon.  Yes  No

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

Answering "yes" to these questions does not constitute an automatic rejection for employment. Date of the offensive, seriousness and nature of the violation, rehabilitation and position applied for will be considered.

Driver's license number if applicable to position:   
State: \_\_\_\_\_

Summarize Your Special Skills or Qualifications: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Previous Employment (begin with most recent position):

Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_

Position(s) Held: \_\_\_\_\_

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

Phone: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_  
Starting Salary and Title: \_\_\_\_\_ Ending Salary and Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference?  Yes  No



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Dates of Employment: From \_\_\_\_\_ To \_\_\_\_

Position(s) Held: \_\_\_\_\_

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

Phone: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_  
Starting Salary and Title: \_\_\_\_\_ Ending Salary and Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_

May we contact this employer for a reference? \_\_\_\_\_ Yes \_\_\_\_ No

Dates of Employment: From \_\_\_\_\_ To \_\_\_\_

Position(s) Held: \_\_\_\_\_

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

Phone: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_  
Starting Salary and Title: \_\_\_\_\_ Ending Salary and Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_

May we contact this employer for a reference? \_\_\_\_\_ Yes \_\_\_\_ No

I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, educational, financial and other related matters as may be necessary for an employment decision. I hereby release employers, schools or individuals from all liability when responding to inquiries in connection with my application.

In the event I am employed, I understand that false or misleading information given in my application or interview(s) may result in termination of my employment for cause.

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

Date: \_