

FREAKYS TATTOO

EMPLOYMENT APPLICATION

NAME: _____ NICKNAME: _____

ADDRESS: _____

CITY/STATE: _____ ZIP CODE: _____

PHONE #: _____ CELL #: _____

REFERRED BY: _____ DATE YOU CAN START: _____

WHERE DID YOU APPRENTICE: _____

UNDER WHO: _____

HOW LONG: _____

Work History - Please List All Previous Shops Worked

NAME _____	FROM _____	TO _____	MANAGER _____
NAME _____	FROM _____	TO _____	MANAGER _____
NAME _____	FROM _____	TO _____	MANAGER _____
NAME _____	FROM _____	TO _____	MANAGER _____
NAME _____	FROM _____	TO _____	MANAGER _____
NAME _____	FROM _____	TO _____	MANAGER _____
NAME _____	FROM _____	TO _____	MANAGER _____
NAME _____	FROM _____	TO _____	MANAGER _____

References:

NAME _____	Phone# _____	Business: _____	Years Known: _____
NAME _____	Phone# _____	Business: _____	Years Known: _____
NAME _____	Phone# _____	Business: _____	Years Known: _____

Education History:

Grade Level Completed: _____