

## Walls of Clay 211 North Kentucky Street McKinney, TX 75069 www.wallsofclaymckinney.com info@wallsofclaymckinney.com

**Applicant Information** 

| Please comp | lete the entire application | Date:                     |  |
|-------------|-----------------------------|---------------------------|--|
| Name:       |                             |                           |  |
| Address:    |                             |                           |  |
|             |                             |                           |  |
|             |                             |                           |  |
| Cell Phone: |                             | Emergency Contact Number: |  |
| Email:      |                             |                           |  |

**Please read carefully:** Our normal studio hours are Thursday/Friday 11:00 am - 6:00 pm, Saturday 10:00 am - 8:00 pm and Sundays 11:00 am - 6:00 pm. Often, we host a private event that occurs after studio hours, these shifts typically end around 9:00pm. When public schools are NOT in session; we are open 6 - 7 days a week. During the summer, we will be open Tuesday – Sunday and open LATE on Fridays and Saturdays.

Days/Hours available to work (please be specific)

| Monday  | _ Tuesday                         |
|---|-----------------------------------|
| Wednesday   | _ Thursday                        |
| Friday  | Saturday                          |
| Sunday  |                                   |
| How many hours can you work per week?<br>What date can you begin? | Minimum hours/wk Maximum hours/wł |

Are you interested in seasonal (summer only) employment or year-round? Check all that apply: \_\_\_\_\_ Seasonal \_\_\_\_\_ Year-Round

| List any | days in th | ne next 3 mo | onths when | you are una | vailable to work: |
|----------|------------|--------------|------------|-------------|-------------------|
|          |            |              |            |             |                   |

| Have you ever been convicted of a crime? [ ] No | []Yes |
|---|-------|
| If yes, explain in detail                       |       |

## Education

|                     |                | Location    | Years Attended |              |
|---------------------|----------------|-------------|----------------|--------------|
| Type of School      | Name of School | City, State | To and From    | Major Degree |
| High School         |                |             |                |              |
| College             |                |             |                |              |
| Business/Trade      |                |             |                |              |
| Professional School |                |             |                |              |

## Current/Previous Employment

Please list your work experience for the past three (3) years beginning with the most current. Attach additional sheets if necessary...

| Name of Last Supervisor     | Employment Dates                                     | Pay or Salary                   |
|-----------------------------|--|---------------------------------|
|                             |  |                                 |
|                             | FROM:  | START:                          |
|                             | FROM.  | START.                          |
|                             |  |                                 |
| May We Contact:             | TO:  | FINAL:                          |
|                             |  |                                 |
| []Yes []No                  |  |                                 |
| Your Last Job Title         |  |                                 |
|                             |  |                                 |
|                             |  |                                 |
|                             |  |                                 |
|                             |  |                                 |
| r promotions while you work | ed for this company                                  |                                 |
|                             |  |                                 |
| •                           | May We Contact:<br>[]Yes []No<br>Your Last Job Title | May We Contact: TO:   []Yes ]No |

| Name of Employer   | Name of Last Supervisor      | Employment Dates    | Pay or Salary |
|--|------------------------------|---------------------|---------------|
| Street Address   |                              | FROM:               | START:        |
| City, State, Zip   | May We Contact:              | TO:                 | FINAL:        |
|  | []Yes []No                   |                     |               |
| Phone Number   | Your Last Job Title          |                     |               |
| Reason for leaving:  |                              |                     |               |
|  |                              |                     |               |
| List the jobs you held, duties performed, skills used, advancements of | or promotions while you work | ed for this company |               |

| Name of Employer  | Name of Last Supervisor     | Employment Dates    | Pay or Salary |
|---|-----------------------------|---------------------|---------------|
|   |                             |                     |               |
|   |                             |                     |               |
| Street Address  |                             | FROM:               | START:        |
|   |                             |                     |               |
| City, State, Zip  | May We Contact:             | TO:                 | FINAL:        |
|   | May We contact.             | 10.                 |               |
|   | []Yes []No                  |                     |               |
|   |                             |                     |               |
| Phone Number  | Your Last Job Title         |                     |               |
|   |                             |                     |               |
| Reason for leaving:   |                             |                     |               |
|   |                             |                     |               |
|   |                             |                     |               |
| List the jobs you held, duties performed, skills used, advancements o | r promotions while you work | ed for this company |               |
|   |                             |                     |               |
|   |                             |                     |               |

Have you ever been involuntarily terminated from a position of employment? [] Yes [] No If so, please explain (note: this does not apply to a layoff or reduction in force for economic reasons).

| References   |        |  |  |
|--|--------|--|--|
| Please list two references other than relatives and/or current and previous employers: |        |  |  |
| Name:  | Phone: |  |  |
| How do you know this person?   |        |  |  |
| Name:  | Phone: |  |  |
| How do you know this person?   |        |  |  |