



Employment Application Form

Please print all information requested except for signature

Date _____

Name _____ Phone _____

Present address _____
Number Street City State Zip

Date of Birth _____ Social Security No. ____-____-____ COVID vaccination _____

E-Mail Address _____

Are you a smoker? _____ Do you have your own reliable transportation? _____

Salary desired _____ Can you work nights? _____

Days/hours available to work No preference _____

Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____ Saturday _____ Sunday _____

When are you available for work? _____

Please list any days in the next 3 months when you are unavailable to work: _____

Person to be notified in case of emergency: _____

| TYPE OF SCHOOL | NAME OF SCHOOL | LOCATION (COMPLETE MAILING ADDRESS) | NUMBER OF YEARS COMPLETED | MAJOR DEGREE |
|--------------------------|----------------|-------------------------------------|---------------------------|--------------|
| High School | | | | |
| College | | | | |
| Business or Trade School | | | | |
| Professional School | | | | |

Have you ever been convicted of a crime? No Yes

If yes, explain number of conviction(s), nature of offense(s), leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation.

Feel free to use another sheet of paper.

What skills/experience do you have with clay/ceramics? _____

Do you have pottery wheel experience? Can you teach someone else how to throw pottery? _____

What can you bring to our studio no one else can? _____

Do you have experience in customer service? _____ What is your definition of excellent customer service? _____

Why choose our studio? _____

Have you been in our studio before? What did you create? _____

Do you have a pet peeve? _____

What do you look for in a boss? _____

If you could change one thing about yourself, what would it be? _____

Favorite movie _____

Favorite book _____

If you could have one superpower, what would it be? _____

What are your hobbies? _____

What is your greatest weakness? _____

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Application for Employment

WORK EXPERIENCE Please list your work experience for the past five years beginning with your most recent job held. If you were self employed, give firm name. Attach additional sheets if necessary.

| | | | |
|--|-------------------------|------------------|---------------|
| Name of employer | Name of last supervisor | Employment dates | Pay or salary |
| Address | | From: | Start: |
| City, State, Zip | | To: | Final: |
| Phone number | Your last job title: | | |
| Reason for leaving (be specific: | | | |
| List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company: | | | |

| | | | |
|--|-------------------------|------------------|---------------|
| Name of employer | Name of last supervisor | Employment dates | Pay or salary |
| Address | | From: | Start: |
| City, State, Zip | | To: | Final: |
| Phone number | Your last job title: | | |
| Reason for leaving (be specific: | | | |
| List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company: | | | |

May we contact your present employer? Yes No

Did you complete this application yourself? Yes No

If not, who did?

Please list two references other than relatives or previous employers:

| 1. | 2. |
|-----------|-----------|
| Name: | Name: |
| Position: | Position: |
| Company: | Company: |
| Address: | Address: |
| Phone: | Phone: |

PLEASE READ CAREFULLY

APPLICATION FORM WAIVER

In exchange for the consideration of my job application by Claying Around (hereinafter called "the Company"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Claying Around or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the Owner/General Manager of the Company. Both the undersigned and Claying Around may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references and others, and hereby release the Company from any liability as a result of such contract.

I further understand that my employment with the Company shall be probationary for a period of sixty (60) days, and further that any time during the probationary period or thereafter, my employment relationship with the Company is terminable at will for any reason by either party.

Signature of application _____ Date: _____

This Company is an equal opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business

Claying Around 1378 Hendersonville rd • Asheville • 828.277.0042 • www.clayingaround.com