WISE PHOTOGRAPHY

by Vivole

APPLICATION FOR EMPLOYMENT

Wise Photography by Nicole, LLC provides equal employment opportunity to all qualified persons, and does not unlawfully discriminated against any person on the basis of race, color, creed, religion, sex, national origin, age, disability, marital or veteran status, sexual orientation, or another legally protected status.

- Complete all items on the application
- Sign and date your application
- Print all requested information
- Send availability during the week to meet in person if requested

| Name | Phone: | | | | |
|--------|--|--|--|--|--|
| | | | | | |
| Email | | | | | |
| Are y | u legally eligible for work in the USA?YESNO | | | | |
| - | son work will required weekday availability, event work will require evenings, remote work may vary based on task. Do you have a | | | | |
| Tiexib | e schedule to accommodate weekday and occasional evening work?YESNO | | | | |
| Do yo | have any days/times during the week you cannot offer assistance? If so please list: | | | | |
| | | | | | |
| Do yo | have any upcoming availability changes? (seasonal job, school schedule, pending move, traveling, etc?) | | | | |
| | | | | | |
| Iagre | e and understand that the schedule may vary week by week depending on tasks and am willing to commit specific hours per week as | | | | |
| agree | agreed upon if hired. I understand Wise Photography by Nicole, LLC primarily offers boudoir photography which is personal, intimate, and | | | | |
| very p | rivate. I agree to sign a Non Disclosure and Privacy Agreement if hired and will respect the images that will be worked with. | | | | |
| Print | Name: Date: | | | | |
| | | | | | |
| TIME! | | | | | |
| rm Pl | OYMENT HISTORY - START WITH MOST RECENT | | | | |
| EMPLO | VER: | | | | |

SUPERVISOR NAME AND PHONE: ______ TOTAL LENGTH OF EMPLOYMENT: _____ ADDRESS:

| | START DAT | E: | _ END DATE: |
|--|--|-----------------|---------------------|
| STARTING WAGE/POSITION: | ENDING WAGE/POSITION: | | |
| RESPONSIBILTIES: | | | REASON FOR LEAVING: |
| | MAY WE CONTACT | ? YES | NO |
| | | | |
| EMPLOYER: | | | |
| | TOTAL LENGTH OF EMPLOYMENT: | | |
| | START DAT | | _ END DATE: |
| | ENDING WAGE/POSITION: | | |
| | WAY WE GOVE LOW | | |
| | MAY WE CONTACT | | NO |
| EMPLOYER: | | | |
| SUPERVISOR NAME AND PHONE: | TOTAL LENGTH OF EMPLOYMENT: | ADDRESS: | |
| | START DAT | 'E: | _ END DATE: |
| STARTING WAGE/POSITION: | ENDING WAGE/POSITION: | | |
| RESPONSIBILTIES: | | | REASON FOR LEAVING: |
| | MAY WE CONTACT | ? YES | NO |
| | | | |
| | | | |
| REFERENCES - NOT FAMILY | | | |
| | | | |
| NAME: | RELATIONSHIP: | PHONE: | |
| Y I W | | D | |
| NAME: | RELATIONSHIP: | PHONE: | |
| EDUCATION | | | |
| SCHOOL: | DEGREE EARNED: | LOCATION: | |
| | | | |
| | | | |
| SCHOOL: | DEGREE EARNED: | LOCATION: | |
| | | | |
| SPECIAL CERTIFICATIONS OR TRAINING: | | | |
| | | | |
| | | | |
| | | | |
| In addition to your work history and edu | cation are there any other skills, qualifications, or experience | e that should l | be |
| considered? | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Please tell me why you are the best fit fo | or this job? | | |
| | | | |

| I certify that the facts set forth in this application are true, complete, and correct to the best of my knowledge. I understand that any |
|--|
| misrepresentations, falsification, or omissions on this application can be grounds for rejection of my application or, if I am employed by this |
| $company, for \ my \ immediate \ termination \ from \ employment. \ I \ authorize \ Wise \ Photography \ by \ Nicole, LLC \ to \ make \ any \ necessary \ inquiries \ and$ |
| $investigations into \ my \ education, \ military, \ or \ employment \ history. \ I \ further \ authorize, \ unless \ otherwise \ indicated \ on \ this \ application, \ the \ release \ otherwise \ indicated \ on \ this \ application, \ the \ release \ otherwise \ indicated \ on \ this \ application, \ the \ release \ otherwise \ indicated \ on \ this \ application, \ the \ release \ otherwise \ indicated \ on \ this \ application, \ the \ release \ otherwise \ indicated \ on \ this \ application, \ the \ release \ otherwise \ indicated \ on \ this \ application, \ the \ release \ otherwise \ indicated \ on \ this \ application, \ the \ release \ otherwise \ indicated \ on \ this \ application, \ the \ release \ otherwise \ indicated \ on \ this \ application \ otherwise \ ot$ |
| of my information to Wise Photography by Nicole, LLC by any of the schools, services, or employers listed on this application. |

It's your day off. What 3 things are you going to do?

IN ADDITION TO THIS APPLICATION, PLEASE ATTACH A A SHORT COVER LETTER EXPLAINING YOUR INTEREST IN THIS POSITION AND WHAT YOU HOPE TO LEARN.

Signed: ______ Date: _____