



**JOB APPLICATION**  
**935 S. Pearson Rd., Pearl, MS. 39208**

It's a Wrap MS is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Should an applicant need reasonable accommodation in the application process, he or she should contact a company representative.

**Please fill out all of the sections below:**

**Applicant Information**

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

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

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

City, State and Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

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

**Employment Position**

Position(s) applying for:

- Sales Associate/Office Assistant
- Vinyl/Tint Installer
- Other: \_\_\_\_\_

How did you hear about this position? \_\_\_\_\_

What days and hours are you available to work? (see below)

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Hours ->							

On what date can you start working, if hired? \_\_\_\_\_



Do you have any **professional** experience in sales; knowledge of vehicle parts; installation; or any other auto-related knowledge? Please **EXPLAIN** in detail.

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(Note: It's a Wrap complies with the ADA and considers reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions.)

**Education and Training**

College

Name	Location (City, State)	Year Graduated	Degree Earned

High School

Name	Location (City, State)	Year Graduated	Degree Earned

Vocational School/Specialized Training

Name	Location (City, State)	Year Graduated	Degree Earned

**Previous Employment**

Employer Name: \_\_\_\_\_

Job Title: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

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

City, State and Zip Code: \_\_\_\_\_

Employer Telephone: \_\_\_\_\_

Dates Employed: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

**Employer Name:** \_\_\_\_\_

Job Title: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

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

City, State and Zip Code: \_\_\_\_\_

Employer Telephone: \_\_\_\_\_

Dates Employed: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

**Employer Name:** \_\_\_\_\_

Job Title: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

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

City, State and Zip Code: \_\_\_\_\_

Employer Telephone: \_\_\_\_\_

Dates Employed: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

**References:**

Please provide 1 personal and 2 professional reference(s) below:

Reference	Relation	Contact Information