Application for Employment

Beadology Iowa 355 S. Clinton St. • Iowa City, Iowa 52240 • 319-338-1566

Date												
Name and Preferred Pronouns			S.S. #									
Address, City, State, Zip												
Home phone number and email			Alternate phone number									
			1									
Is your availability based on a school schedule? 🔲 Yes				D No								
Check your available hours below:												
	mornir		-	9		afternoon/evening						
		8 - 9	9-10	10-11	11-12	12-1	1-2	2-3	3-4	4-5	5-6	6-7
Monda	ау	\bigcirc	0	0	\bigcirc	0	0	0	0	0	\bigcirc	0
Tuesd	lay	0	0	0	0	0	0	0	0	0	0	0
Wedne	esday	0	0	0	0	0	0	0	0	0	0	0
Thurso	day	0	0	0	0	0	0	0	0	0	0	0
Friday	/	0	0	0	0	0	0	0	0	0	0	0
Saturo	day	0	0	0	0	0	0	0	0	0	0	0
Please note your Holiday Schedule Availab	oility:											
Spring Break												
Summer Break												
Thanksgiving												
Christmas/New Year												
Tell us a little more about you: (attach additional sheets if needed; attach resume if available)												
Do you have skills or experience in teaching Arts or Crafts?												
How long do you plan to be in Iowa City?												
What do you see yourself doing in 3 years?												

What do you feel you will gain by working at Beadology? _____

Anything else you would like us to know?_____

Please circle those activities in which you participate (circle all that apply):

Knitting Bead Stringing Wirework Metal Work Stained Glass Fused Glass Lampworking Boro Glass Work Crocheting (with/without beads) Canoeing Fiber Arts Rock Climbing Bead Weaving Gardening Hair Styling Drawing Painting Sewing Pottery (throwing/handbuilding) Dog Grooming Viking Knit Chain Maille Kumihimo Teaching Fashion Design Collage Stamping Scrapbooking Dance Candle Making Cooking

Other(s): _____

Educational Background	Circle last year completed					Course or Major
High school name, city, state	1	2	3	4	GED	
Technical/Vocational school, city, state	1	2				
College/University, city, state	1	2	3	4		
Other	1	2	3	4		

Please Provide 3 References

Name and current address	Relationship	Phone #
1)		
2)		
3)		

Name of Employer, city, state	Start date	End Date		
Supervisor's name	phone #	May we call? Yes No		
Job title				
Responsibilities				
Reason for leaving				
Name of Employer, city, state	Start date	End Date		
Supervisor's name	phone #	May we call? Yes No		
Job title				
Responsibilities				
Reason for leaving				
Name of Employer, city, state	Start date	End Date		
Supervisor's name	phone #	May we call? Yes No		
Job title				
Responsibilities				
Reason for leaving				

Beadology Iowa is an equal opportunity employer. We consider applicants without regard to race, creed, color, sex, national origin, religion, age, sexual orientation, gender identity, marital status, mental or physical disability, genetic information, veteran status or other class/category protected by federal, state, or local law, except where age, sex or physical or mental ability constitute a bona fide occupational qualification necessary for job performance. Persons who are members of a protected class are encouraged to apply.

APPLICANT AUTHORIZATION

Work History (list most recent employer first)

I hereby authorize Beadology Iowa to conduct their normal pre-employment inquiries as described. This authorization is valid for one year from this date and any inquiries made after that date will require a new signed release. I agree that withholding pertinent information or submitting false information in connection with this application for employment constitutes valid grounds for dismissal and loss of all employee benefits and privileges. I acknowledge that I have read and understand the above.