A-1 WINDOW TINTING

EMPLOYMENT APPLICATION • WINDOW TINT TECHNICIAN

Thank you for your interest in joining A-1 Window Tinting. Please complete all applicable sections. We are looking for dependable, detail-oriented technicians who take pride in clean, professional installations.

1. APPLICANT INFORMATION

Full Legal Name: _____	Preferred Name: _____
Phone: _____	Email: _____
Address: _____	City / State / ZIP: _____

Position Applied For: ■ Window Tint Technician ■ Installer / Trainee ■ Other: _____

How did you hear about us? ■ Indeed ■ Social Media ■ Referral ■ Walk-in ■ Other: _____

2. AVAILABILITY

Available Start Date: _____	Desired Hours: ■ Full-Time ■ Part-Time
Monday: _____	Tuesday: _____
Wednesday: _____	Thursday: _____
Friday: _____	Saturday: _____

Are you available for occasional overtime or schedule changes? ■ Yes ■ No

3. WINDOW TINTING EXPERIENCE

Years of professional tinting experience: _____	Years of automotive experience: _____
Most recent tinting employer / shop: _____	Dates: _____

Experience level:
■ No Experience ■ Trainee ■ 1–2 Years ■ 3–5 Years ■ 5+ Years

What types of tint work have you performed?
■ Automotive ■ Residential ■ Commercial ■ Fleet ■ Windshields ■ Sunroofs

Approx. number of vehicles tinted per week at your previous shop: _____

Describe your experience with difficult windows, shrinking, and contamination control:

_____

_____

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TECHNICIAN SKILLS & WORK HISTORY

4. TECHNICAL SKILLS

Skill / Task	None	Basic	Proficient	Expert
Pattern / plotter cutting	■	■	■	■
Computer-cut film systems	■	■	■	■
Heat shrinking	■	■	■	■
Single-piece back glass	■	■	■	■
Front windshield / visor strip	■	■	■	■
Sunroof / panoramic roof	■	■	■	■
Removal / adhesive cleanup	■	■	■	■
Paint-safe trimming / cutting	■	■	■	■
Final inspection / quality control	■	■	■	■

5. PREVIOUS EMPLOYMENT

EMPLOYER #1

Company: _____	Phone: _____
Position: _____	Dates Employed: _____
Supervisor: _____	Reason for Leaving: _____
Primary Duties: _____ _____	

EMPLOYER #2

Company: _____	Phone: _____
Position: _____	Dates Employed: _____
Supervisor: _____	Reason for Leaving: _____
Primary Duties: _____ _____	

EMPLOYER #3

Company: _____	Phone: _____
Position: _____	Dates Employed: _____
Supervisor: _____	Reason for Leaving: _____
Primary Duties: _____ _____	

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FINAL INFORMATION & APPLICANT CERTIFICATION

6. ADDITIONAL INFORMATION

Valid driver's license? ■ Yes ■ No	Reliable transportation? ■ Yes ■ No
Comfortable working in heat / outdoor conditions? ■ Yes ■ No	Comfortable lifting / standing for extended periods? ■ Yes ■ No
Desired hourly pay / salary: _____	Earliest start date: _____

7. APPLICANT CERTIFICATION

I certify that the information provided in this application is true and complete to the best of my knowledge. I understand that providing false or misleading information may result in disqualification from employment or termination if discovered after hiring. I authorize A-1 Window Tinting to verify the employment information provided, as permitted by law. I understand that completion of this application does not guarantee employment.

Applicant Signature: _____	Date: _____

FOR OFFICE USE ONLY

Interview Date: _____	Interviewer: _____
Recommendation: ■ Hire ■ Second Interview ■ Hold ■ Do Not Hire	Starting Rate: _____
Notes: _____	
_____	