



## Employment Application Form

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE

Date: \_\_\_\_\_

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

Last

First

Middle

Maiden

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

Street Address

City

State

Zip

Other Names Used: \_\_\_\_\_

Place of Birth (city & state): \_\_\_\_\_ Primary Phone: \_\_\_\_\_

Position Applied For: \_\_\_\_\_ Date you can start: \_\_\_\_\_ Desired Salary: \_\_\_\_\_  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

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

Referred By: \_\_\_\_\_

Are you currently employed?:    Yes    No

TYPE OF SCHOOL	NAME OF SCHOOL	ADDRESS (city & state)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
HIGH SCHOOL				
COLLEGE				
BUSINESS OR TRADE SCHOOL				
PROFESSIONAL SCHOOL/ CERTIFICATES				

Have you ever been convicted of a felony?	YES	NO
Have you ever been convicted of a misdemeanor?	YES	NO
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.		

Do you have a valid drivers license?	YES	NO	
Driver License Number: _____	State of Issue: _____	Expiration Date: _____	
What is your means of transportations to work? _____			
Have you had any accidents during the past 3 years?	YES	NO	If yes how many? _____
Have you had any moving violations during the past 3 years?	YES	NO	If yes how many? _____

Have you ever been in the armed forces?	YES	NO
Are you now a member of the National Guard?	YES	NO
US Military or Naval Service: _____	Rank: _____	
Date Entered: _____	Discharge Date: ___/___/___	
Describe any job related training, apprenticeship, or skills you have:		
_____		
_____		
_____		

Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

<b>WORK EXPERIENCE</b>		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.	
<b>NAME OF EMPLOYER</b>	<b>LAST SUPERVISOR</b>	<b>EMPLOYMENT DATES</b>	<b>PAY RATE OR SALARY</b>
		From: _____	Start: _____
		To: _____	Final: _____
Address:		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.			

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		To: _____	Final: _____
Address:		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.			

Please list three (3) references (who are not related to you) such as previous supervisors, colleagues, volunteer supervisors, teachers, or other people of a similar nature.

<b>NAME</b>	<b>PROFESSIONAL RELATIONSHIP</b>	<b>TITLE &amp; COMPANY NAME</b>	<b>YEARS KNOWN</b>	<b>PHONE</b>

**PLEASE READ THE FOLLOWING APPLICATION WAIVERS CAREFULLY**

In exchange for the consideration of my job application by Macson's Inc. (hereinafter also know as "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, benefit plans, 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 Macson's Inc. 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 President /General Manager of the Company. Both the undersigned and Macson's Inc. 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 may 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 also understand that (1) the Company has a drug and alcohol policy that provides for preemployment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I authorize Macson's Inc. to obtain criminal background reports and/or investigative criminal background reports for the pre-employment background investigation, and, if I am hired, at any time during my employment. I understand that these reports might include, but are not limited to, a search of my criminal background, reference checks, driving record checks, and verification of my identification and Social Security Number. I agree that this Disclosure/Authorization, in original or copy form, is valid for all current and future criminal background reports.

I understand that Macson's Inc. may use such criminal background reports for employment purposes, including, but not limited to, hiring, promotion, retention, and termination. If the Company obtains a criminal background report or an investigative criminal background report about me, and if the Company considers any information when making an employment decision that directly or adversely affect me, I will be provided with a copy of the applicable reports before the decision is finalized.

I understand that, in connection with the routine processing of your employment application, the Company may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, the Company, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

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

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Social Security Number: \_\_\_\_\_ : \_\_\_\_\_ : \_\_\_\_\_

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Macson's Inc. is an equal employment 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.**