

# H & H MACK SALES, INC.

## APPLICATION FOR EMPLOYMENT (PRE-EMPLOYMENT QUESTIONNAIRE) (AN EQUAL OPPORTUNITY EMPLOYER)

<b>PERSONAL INFORMATION</b>			DATE	
NAME			SOCIAL SECURITY NUMBER	
LAST	FIRST	MIDDLE	-	-
ADDRESS				
STREET		CITY	STATE	ZIP
TELEPHONE: HOME			CELL	

LAST

ARE YOU 18 YEARS OR OLDER? Yes  No

ARE YOU EITHER A U.S. CITIZEN OR AN ALIEN AUTHORIZED TO WORK IN THE UNITED STATES? Yes  No

**EMPLOYMENT DESIRED**

POSITION	DATE YOU CAN START	SALARY DESIRED	Hourly <input type="checkbox"/> Salary <input type="checkbox"/>
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ARE YOU EMPLOYED NOW? Yes  No  IF SO MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? Yes  No

FIRST

REFERRED BY \_\_\_\_\_

EDUCATION	NAME AND LOCATION OF SCHOOL	*NO OF YEARS ATTENDED	*DID YOU GRADUATE?	SUBJECTS STUDIED
HIGH SCHOOL				NOT APPLICABLE
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL				
COLLEGE				

MIDDLE

DRIVERS LICENSE NUMBER \_\_\_\_\_ STATE ISSUED \_\_\_\_\_

HAVE YOU EVER BEEN ARRESTED OR CONVICTED OF A CRIME? Yes  No

HAVE YOU HAD AN ACCIDENT IN THE LAST 3 YEARS? Yes  No

HAVE YOU BEEN CONVICTED OF DRIVING UNDER THE INFLUENCE (DUI) IN THE LAST 3 YEARS? Yes  No

DO YOU HAVE A CDL DRIVERS LICENSE? Yes  No

DO YOU SPEAK ANY LANGUAGE OTHER THAN ENGLISH? Yes  No  LANGUAGE: \_\_\_\_\_

PLEASE LIST ANY TECHNICAL TRAINING, CERTIFICATIONS, COMPUTER SKILLS OR OTHER RELATED JOB TRAINING

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US MILITARY OR NAVAL SERVICE	RANK	PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESERVES
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\*The Age Discrimination in Employment Act of 1987 prohibits discrimination on the basis of age with respect to individuals who are at least 40 years of age

**FORMER EMPLOYERS** (LIST BELOW LAST THREE EMPLOYERS, STARTING WITH LAST ONE FIRST).

DATE MONTH AND YEAR	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM				
TO				
FROM				
TO				
FROM				
TO				

**REFERENCES:** GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

	NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED
1				
2				
3				

IN CASE OF  
EMERGENCY NOTIFY

NAME HOME PHONE CELL PHONE

I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU.

I UNDERSTAND AND AGREE THAT IF I AM EMPLOYED, MY EMPLOYMENT WILL BE "AT-WILL", WHICH MEANS THAT THE COMPANY MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, WITH OR WITHOUT CAUSE AND WITH OR WITHOUT NOTICE.

DATE SIGNATURE

DO NOT WRITE BELOW THIS LINE  
INTERVIEWED BY DATE

REMARKS:

NEATNESS ABILITY

HIRED  YES  NO POSITION DEPT

SALARY/WAGE DATE REPORTING TO WORK

APPROVED 1 2 3  
EMPLOYMENT MANAGER DEPT. HEAD GENERAL MANAGER