

# McCall Service, Inc.

## Pre-Employment Application

We greatly appreciate your interest in our organization and assure you that all applicants are considered for positions without regard to race, color, sex, age, religion, national origin, disability, veteran status or any other status protected under local, state or federal law. This application must be completed in its entirety and signed. Information submitted on this application and on any other accompanying or required documents are subject to verification.

NOTE: All new hires are required to submit documentation in accordance with the Immigration Reform and Control Act of 1986.

Date of Application: \_\_\_\_\_

**Personal Information:**

Name: \_\_\_\_\_  
Last First MI

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

Phone #: \_\_\_\_\_ Alternate Phone #: \_\_\_\_\_

Present Address: \_\_\_\_\_  
Street City State Zip

How long have you lived at this address? \_\_\_\_\_

Previous Address: \_\_\_\_\_  
Street City State Zip

How long have you lived at this address? \_\_\_\_\_

Are you at least 18 years of age?  Yes  No Are you legally eligible for employment in the US?  Yes  No

**Employment Information:**

Position applying for: \_\_\_\_\_ Date available to start: \_\_\_/\_\_\_/\_\_\_

Referred by: \_\_\_\_\_

Type of employment desired:  Full time  Part time / # hours \_\_\_\_\_  Temporary

Wage Desired: \$\_\_\_\_\_ per \_\_\_\_\_ Are you willing to work overtime, if required?  Yes  No

Any shifts or hours that you cannot work: \_\_\_\_\_

Are you able to perform, with or without reasonable accommodation, the essential functions of this job?  Yes  No  
(If you have any questions about the essential functions of the job, please ask for clarification.)

Have you ever applied for a position with this Company before?  Yes  No If yes, when? \_\_\_\_\_

Have you ever been convicted of a crime or pled "No Contest"?  Yes  No

If "yes", state the date and places where the charges occurred. (Answering "yes" will not automatically disqualify you for employment): \_\_\_\_\_

Do you have any friends or relatives that work for the company?  Yes  No If "yes", please list: \_\_\_\_\_

Our company is a Drug Free Workplace. Are you able to comply?  Yes  No

Are you presently employed?  Yes  No If yes, may we contact your present employer?  Yes  No

<b>Education:</b>			
Name & Location	Years Completed	Did you graduate?	Degree earned (Major)
High School		[ ] Yes [ ] No	
College		[ ] Yes [ ] No	
Graduate School		[ ] Yes [ ] No	
Trade, Business, or Correspondence School		[ ] Yes [ ] No	
List any specialized training, apprenticeship, licenses, certifications, skills or experience that might be related to the position for which you are applying. _____ _____			

<b>Employment Experience:</b>	
Provide accurate and complete full/part-time employment information. Start with your present or most recent employer first.	
(If applicable, provide employment information for up to the last 10 years. Attach additional sheets if needed.)	
Company Name:	Telephone:
Address:	Employed From: (mo/yr) To: (mo/yr)
Name of Supervisor:	Salary/Wages Start: Finish:
State job title and responsibilities:	Reason for separation  May we contact the employer: Yes [ ] No [ ]
Company Name:	Telephone:
Address:	Employed From: (mo/yr) To: (mo/yr)
Name of Supervisor:	Salary/Wages Start: Finish:
State job title and responsibilities:	Reason for separation  May we contact the employer: Yes [ ] No [ ]
Company Name:	Telephone:
Address:	Employed From: (mo/yr) To: (mo/yr)
Name of Supervisor:	Salary/Wages Start: Finish:
State job title and responsibilities:	Reason for separation  May we contact the employer: Yes [ ] No [ ]

<b>References:</b>			
List below the names of three persons, not related to you, whom you have known for at least one year.			
Name / Title	Address & Phone	Business	Years Known

**Acknowledgement:**

By signing below, I affirm that all of the information provided on and/or with this application and in any interview will be true, complete and accurate, and that I have not misrepresented or withheld any information. Further, I agree that if the information is found to be false, misleading, or unsatisfactory in any respect (in the Company's judgment) that I will be disqualified from consideration for employment or subject to immediate dismissal if discovered after I am hired.

I understand that submission of an application does not guarantee employment. I further understand that if I am hired that my employment with the Company is at will, for no definite period of time, and may be terminated either by the Company or myself at any time, with or without cause or notice.

I understand and authorize that the Company may contact my previous employers to obtain the pertinent information related to my employment with them. Further, I release my previous employers from any liability from their disclosure of truthful and accurate information about me to the Company.

I understand that any offer of employment may be contingent upon a background investigation and/ or drug screen. I hereby release all parties, including agents, from any claims, causes of action, or liability from damages that may or could result from furnishing such information to the Company or as a result of information obtained through a background investigation or drug screen.

I understand that this application is considered current for 30 days. If I wish to be considered for employment after this period, I must complete and submit a new application.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_