

**MID-SOUTH STEAM BOILER & ENGINEERING CO., INC.  
 MID-SOUTH CONTROL & SUPPLY CO., INC.  
 APPLICATION FOR EMPLOYMENT**

**PRE-EMPLOYMENT  
 QUESTIONNAIRE AN EQUAL  
 OPPORTUNITY EMPLOYER**

**PERSONAL INFORMATION**

NAME (LAST NAME FIRST)				
PRESENT ADDRESS	APT. NO.	CITY	STATE	ZIP
PERMANENT ADDRESS	APT. NO.	CITY	STATE	ZIP
ARE YOU 18 YEARS OR OLDER? <input type="checkbox"/> YES <input type="checkbox"/> NO		PHONE NUMBER (REQUIRED)		

HAVE YOU EVER BEEN CONVICTED OF A FELONY?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
<b>NOTICE: THIS COMPANY MAINTAINS A "NO FELONY POLICY". BACKGROUND CHECKS          ARE PERFORMED ON ALL APPLICANTS CONSIDERED FOR EMPLOYMENT.</b>			
IF YES, EXPLAIN			

**DESIRED EMPLOYMENT**

POSITION	DATE YOU CAN START	SALARY DESIRED
ARE YOU EMPLOYED NOW? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO	
EVER APPLIED TO THIS COMPANY BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO	WHERE?	WHEN?
EVER WORKED FOR THIS COMPANY BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO	WHERE?	WHEN?
REASON FOR LEAVING		
NAME OF LAST SUPERVISOR AT THIS COMPANY		
WHO REFERRED YOU TO THIS COMPANY?		
<input type="checkbox"/> EMPLOYMENT AGENCY	<input type="checkbox"/> NEWSPAPER ADVERTISING	<input type="checkbox"/> FRIEND
<input type="checkbox"/> STATE EMPLOYMENT OFFICE	<input type="checkbox"/> COLLEGE PLACEMENT SERVICE	<input type="checkbox"/> WALK IN
<input type="checkbox"/> RADIO	<input type="checkbox"/> OTHER	

## EDUCATION

SCHOOL LEVEL	NAME AND LOCATION OF SCHOOL	NO. OF YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
GRAMMAR SCHOOL				
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL				

## GENERAL

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK
SPECIAL TRAINING
SPECIAL SKILLS

## FORMER EMPLOYERS

LIST BELOW LAST THREE EMPLOYERS, STARTING WITH THE MOST RECENT

NAME OF PRESENT OR LAST EMPLOYER				
ADDRESS		CITY	STATE	ZIP
STARTING DATE	LEAVING DATE		JOB TITLE	
WEEKLY STARTING SALARY	WEEKLY FINAL SALARY	MAY WE CONTACT YOUR SUPERVISOR? <input type="checkbox"/> YES <input type="checkbox"/> NO		
NAME OF SUPERVISOR		TITLE	PHONE	
DESCRIPTION OF WORK				
REASON FOR LEAVING				
NAME OF PREVIOUS EMPLOYER				
ADDRESS		CITY	STATE	ZIP
STARTING DATE	LEAVING DATE		JOB TITLE	
WEEKLY STARTING SALARY	WEEKLY FINAL SALARY	MAY WE CONTACT YOUR SUPERVISOR? <input type="checkbox"/> YES <input type="checkbox"/> NO		
NAME OF SUPERVISOR		TITLE	PHONE	
DESCRIPTION OF WORK				
REASON FOR LEAVING				

### PREVIOUS EMPLOYERS CONTINUED

NAME OF PREVIOUS EMPLOYER			
ADDRESS	CITY	STATE	ZIP
STARTING DATE	LEAVING DATE	JOB TITLE	
WEEKLY STARTING SALARY	WEEKLY FINAL SALARY	MAY WE CONTACT YOUR SUPERVISOR? <input type="checkbox"/> YES <input type="checkbox"/> NO	
NAME OF SUPERVISOR	TITLE	PHONE	
DESCRIPTION OF WORK			
REASON FOR LEAVING			

### REFERENCES

BELOW, GIVE THE NAMES OF THREE PERSONS YOU ARE NOT RELATED TO WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

NAME	ADDRESS	YEARS ACQUAINTED	BUSINESS	PHONE NUMBER

### SERVICE RECORD

BRANCH OF SERVICE RECORD	DISCHARGE DATE RANK

### AUTHORIZATION

"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 AND EMPLOYERS LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE AND RELEASE THE COMPANY FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM UTILIZATION OF SUCH INFORMATION.

I ALSO UNDERSTAND AND AGREE THAT NO REPRESENTATIVE OF THE COMPANY HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING, UNLESS IT IS IN WRITING AND SIGNED BY AN AUTHORIZED COMPANY REPRESENTATIVE.

DATE

SIGNATURE

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FOR INTERVIEWER'S USE ONLY**

INTERVIEWED BY	DATE
COMMENTS	

INTERVIEWED BY	DATE
COMMENTS	

INTERVIEWED BY	DATE
COMMENTS	

HIRED (DATE) FOR DEPT.	FOR POSITION
SALARY WAGES	WILL REPORT

APPROVED 1	EMPLOYMENT MANAGER	DATE
APPROVED 2	EMPLOYMENT MANAGER	DATE
APPROVED 3	EMPLOYMENT MANAGER	DATE