

APPLICATION FOR EMPLOYMENT

MacTaggart's Market & Deli

230 EAST LAKE LAWN PLACE MADISON, WI 53703 PH: (608)251-0911 FAX: (608) 251-6611

DATE:

PERSONAL INFORMATION

LAST NAME		M.I.	FIRST NAME		
PRESENT ADDRESS		APT#	CITY	STATE	ZIP
PERMANENT ADDRESS		APT #	CITY	STATE	ZIP
HOME PHONE		ALTERNATE PHONE			
ARE YOU 18 YEARS OR OLDER?					
<input type="checkbox"/> YES <input type="checkbox"/> NO					

DESIRED EMPLOYMENT

POSITION DESIRED		DATE YOU CAN START		DESIRED SALARY	
ARE YOU EMPLOYED NOW?		IF SO, MAY WE INQUIRE THIS EMPLOYER?			
<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO			
HAVE YOU EVER APPLIED WITH US BEFORE?		WHEN?			
<input type="checkbox"/> YES <input type="checkbox"/> NO					
HAVE YOU EVER WORKED FOR US BEFORE?		WHEN?			
<input type="checkbox"/> YES <input type="checkbox"/> NO					
HOW MANY HOURS ARE YOU SEEKING PER WEEK?					

EDUCATION

SCHOOL LEVEL	NAME & LOCATION	NO OF YEARS	GRADUATE?	SUBJECTS STUDIED
GRAMMAR SCHOOL				
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL				

MACTAGGART'S IS AN EQUAL OPPORTUNITY EMPLOYER

FORMER EMPLOYERS

LIST BELOW LAST THREE EMPLOYERS, STARTING WITH THE MOST RECENT ONE FIRST

NAME OF PRESENT OR LAST EMPLOYER				
ADDRESS		CITY	STATE	ZIP
STARTING DATE	LEAVING DATE		JOB TITLE	
STARTING SALARY	FINAL SALARY	MAY WE CONTACT YOUR SUPERVISOR?		
		YES	NO	
NAME OF SUPERVISOR		TITLE	PHONE	
DESCRIPTION OF WORK PERFORMED				
REASON FOR LEAVING				

NAME OF PREVIOUS EMPLOYER				
ADDRESS		CITY	STATE	ZIP
STARTING DATE	LEAVING DATE		JOB TITLE	
STARTING SALARY	FINAL SALARY	MAY WE CONTACT YOUR SUPERVISOR?		
		YES	NO	
NAME OF SUPERVISOR		TITLE	PHONE	
DESCRIPTION OF WORK PERFORMED				
REASON FOR LEAVING				

NAME OF PREVIOUS EMPLOYER				
ADDRESS		CITY	STATE	ZIP
STARTING DATE	LEAVING DATE		JOB TITLE	
STARTING SALARY	FINAL SALARY	MAY WE CONTACT YOUR SUPERVISOR?		
		YES	NO	
NAME OF SUPERVISOR		TITLE	PHONE	
DESCRIPTION OF WORK PERFORMED				
REASON FOR LEAVING				

REFERENCES

LIST THREE PERSONS YOU ARE NOT RELATED TO AND HAVE KNOWN AT LEAST ONE YEAR

NAME	ADDRESS & PHONE	BUSINESS	YEARS KNOWN

SERVICE RECORD

BRANCH OF SERVICE	DISCHARGE DATE/RANK

HAVE YOU BEEN CONVICTED OF A FELONY WITHIN THE LAST 5 YEARS?			
<table border="1"> <tr> <td align="center">YES</td> <td align="center">NO</td> </tr> </table>		YES	NO
YES	NO		
IF YES, EXPLAIN. (WILL NOT NECESSARILY EXCLUDE YOU FROM CONSIDERATION)			

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 AND 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 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