



Team Member Employment Application

Join the Team!

WORK EXPERIENCE

Please list your previous experience beginning with most recent position.

1. Employer name and address _____
Phone _____ Ending pay _____ Position _____
Dates of employment: _____ to _____ Supervisor _____
Reason for leaving _____
Eligible for rehire? Yes No
2. Employer name and address _____
Phone _____ Ending pay _____ Position _____
Dates of employment: _____ to _____ Supervisor _____
Reason for leaving _____
Eligible for rehire? Yes No

IMPORTANT AGREEMENT: PLEASE READ THE FOLLOWING AND SIGN YOUR NAME BELOW

In compliance with Federal and State Equal Employment Opportunity Laws, qualified applicants are considered for all positions applied for without regard to race, color, religion, sex, national origin, age, veteran's status, disability, gender identity or any legally protected status. I certify that answers given herein are true and complete to the best of my knowledge. In the event of my employment, I understand that false or misleading information given in my application or interview(s) may result in a discharge and I acknowledge and understand that (1) no application, policy or similar writing constitutes a guarantee of employment or a contract of employment with the Company(2) my employment and compensation can be terminated at any time, for any reason or for no reason by the Company or me, and (3) no Manager or official of the Company has the authority to enter into any contract or agreement with me for employment for any specified period of time. I understand that unless otherwise prohibited by applicable law, I may be required to submit to a physical examination with satisfactory results as a condition of my employment and may be required to submit to any drug or other test deemed appropriate by the Company. I authorize you to make such investigations and inquiries of my personal, employment, to financial history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, or persons from all liability for providing lawful information to inquiries in connection with my application.

READ CAREFULLY BEFORE SIGNING

Mac and Bob's is an **Equal Employment Opportunity Employer**.

Signature of Applicant _____ Date _____

WE OFFER

- Full & Part-Time Positions
- Flexible Hours for School
- Employee Meal Discounts
- Excellent Wages
- Career Advancement Opportunities



316 E MAIN ST,
SALEM, VA 24153
(540) 589-5999

macandbobs.com

We want to know about YOU!

PERSONAL INFORMATION

Name (Last) _____ (First) _____ City _____ State _____ Zip _____
 Address _____
 Home (_____) _____ Cell Phone (_____) _____
 Email Address _____
 Desired Pay _____ Date you can start _____
 Position applying for _____
 Are you legally eligible for employment in the USA? Yes No Are you 18 years of age or older? Yes No
 Highest education level achieved to date _____ Schools attended _____
 Do you have reliable transportation? Yes No

HISTORY

Have you ever been convicted of a crime? Yes No If yes, list details and dates _____
 Have you ever worked for Mac and Bob's? Yes No If yes, list dates _____
 Do you know anyone that works for us? Yes No If yes, who? _____
 Were you referred by an employee? Yes No If yes, who? _____
 Have you ever been fired or asked to resign Yes No If yes, provide employer name(s), and reason(s) _____
 from a job? _____

AVAILABILITY

Circle all shifts that you are able to work: am (open - 4pm) pm (4pm - close)

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
am	am	am	am	am	am	am
pm	pm	pm	pm	pm	pm	pm

REFERENCES

Please list two references (not relatives) below.

1. Name _____ Company/Position _____
 Phone _____
 2. Name _____ Company/Position _____
 Phone _____