



We are an Equal Opportunity Employer and are committed to excellence through diversity.

Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

Application for Employment

Applicant Information

Full Name:

Address:

City:

State:

Zip:

Phone Number:

Mobile Number:

Email Address:

How were you referred to Macksteel Warehouse, Inc.?

Are you a U.S. Citizen? Yes No

If no, are you authorized to work in the U.S.? Yes No

Are you 18 years of age or older? Yes No

Have you ever worked for Macksteel Warehouse, Inc., or any of its affiliates? Yes No If yes, when? _____

Have you ever been convicted of a felony? Yes No
If yes, please explain: _____

Position

Position of Interest:

Date Available:

Desired Pay:

Employment Desired:

Full-time Part-time Seasonal/Temporary

Shift Desired:

Days / 1st Shift Nights / 2nd Shift Weekend Shift

If selected for employment, can you satisfactorily complete pre-employment screening? Yes No

Regular and punctual attendance at work is an essential requirement. Are you able to satisfy this requirement? Yes No

Education

School Name & Location:

Years Attended:

Degree/Certification:

Major:

References

Name:

Relationship:

Company (if applicable):

Phone:

Other Skills and Qualifications

Employment History

(1) Company Name:	Job Title:	
Address:	Job Duties/Responsibilities:	
City & State:		
Phone Number:	Dates Employed:	Wage/Salary:
Reason for leaving?		
(2) Company Name:	Job Title:	
Address:	Job Duties/Responsibilities:	
City & State:		
Phone Number:	Dates Employed:	Wage/Salary:
Reason for leaving?		
(3) Company Name:	Job Title:	
Address:	Job Duties/Responsibilities:	
City & State:		
Phone Number:	Dates Employed:	Wage/Salary:
Reason for leaving?		

Signature Disclaimer

I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be a sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment, and that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that it is the policy of this organization not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

Name (Print)	Signature	Date
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