

Mack Manufacturing Application For Employment

Complete this form, drop it off, mail it or fax it to us at 251-653-1365.

Employment Opportunities Mack Manufacturing 7205 Bellingrath Road Theodore, AL 36582

Instructions: Print clearly in black or blue ink. Sign and date the form.

Mack does require a pre-employment drug screen. If you are not drug free, there is no need to apply.

			Dat	e://
PERSONAL INFORMATION	ON:			(month / date / year)
First Name			Last	
Address				
City	State	Zip		
Email				
Home Tel. ()	Cell ()		Social #	
Do you have any friends of	r relatives that wo	rk or have w	orked here? Yes	No
If yes who?				
Are you eligible to work	in the United Sta	tes? Yes _	No	
If you are under age 18,	what is your birth	n date?	//	_
POSITION / AVAILABILITY Positions at Mack Manufa				
Helper (Laborer), Welder	, Fitter, Machinis	t, CNC Ope	rator, Hydraulic	Tech, Maintenance
Position Applied For			<u></u>	
Pay Expected (hourly) \$				
What shift can you work?	Identify either one	or both for y	our preference.	
Day shift: Mon-Fri 6:	00 am - 2:30 pm			
Night shift: Mon-Thu	rs 2:30 pm - 1:00 a	am		

What date are you able to start work?	//	/			
Are you able to work overtime? Yes	_ No	_			
If you are currently employed, would you	have to	leave a notice? Yes	No		
If so how long?	_				
Have you applied here before? Yes	_ No	_ If yes what date?	/	/	
Have you interviewed here before? Yes	No	If yes what date?	/	/	
Have you worked here before? Yes	_ No	_ If yes what date?	/	/	
EDUCATION:					
Do you have any Degrees / Certificates / job you are applying for?	License	s / Awards that would a	pply to o	ur company	or the
Do you have any skills that would apply	to our co	mpany or the job you a	re applyir	ng for?	
EMPLOYMENT HISTORY:					
Present or Last Place of Employment:					
Employer:					
Address:					
Supervisor:					
Phone: ()					
Position Title:					
Employed From: to:					
Responsibilities:					
Salary: \$					
Reason for Leaving:					

Previous Employment:			
Employer:	-	 	
Address:			
Supervisor:			
Phone: ()			
Email:			
Position Title:			
Employed From:	to:		
Responsibilities:		 	
Salary: \$			
Reason for Leaving:		 	
Previous Employment:			
Employer:			
Address:			
Supervisor:		 	
Phone: ()			
Email:			
Position Title:			
Employed From:	to:		
Responsibilities:		 	
Salary: \$			
Reason for Leaving:		 	

Previous Employment:
Employer:
Address:
Supervisor:
Phone: (
Email:
Position Title:
Employed From: to:
Responsibilities:
Salary: \$
Reason for Leaving:
May We Contact Your Present Employer? Yes No
☐ I certify that information contained in this application is true and complete. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired.
I hereby give Mack Manufacturing Inc. permission to make inquiries to my previous employers to obtain information concerning my position, wages and dates of employment and reasons for leaving.
Signature
Date / /