MUSTANG SALLY'S
APPLICATION FOR EMPLOYMENT

PREP-EMPLOYMENT QUESTIONNAIRE • AN EQUAL OPPORTUNITY EMPLOYER

PERSONAL INFORMATION

Date _____

Name _____ SS # _____
Last First MI

Present Address _____
Street City ST Zip

Permanent Address _____
Street City ST Zip

Phone _____ Are you 21 years or older? ☐ YES ☐ NO

Are you prevented from lawfully becoming employed in this country because of visa or immigration status? ☐ YES _____ ☐ NO _____

EMPLOYMENT DESIRED

Position _____ Date You Can Start _____ Salary Desired _____

Are Your Employed Now? _____ May we inquire at your present employer? _____

Ever Applied to Mustang Sally's Before? _____ When? _____

Referred by _____

EDUCATION	Name & 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 Skills _____

Activities: (Civic, Athletic, Etc.) _____

Exclude Organization, The Name of which indicates the Race, Creed, Sex, Age, Marital Status, Color or Nation of Origin of its members.

U.S. Military or Naval Service: _____ RANK _____ Present Membership _____

This form has been revised to comply with the provisions of the Americans with Disabilities Act and the final regulations and interpretive guidance promulgated by the EEOC on July 26, 1991.

FORMER EMPLOYERS (List below last three employers, starting with the last one first)

Date Month and Year	Name & Address of Employer	Salary	Position	Reason for Leaving
From				
To				
From				
To				
From				
To				
Which of these jobs did you like best?				
What did you like most about this job?				

REFERENCES: (Not related to you, whom you have known at least one year.)

Name	Phone	Business	Years Acquainted
1.			
2.			
3.			

In case of emergency notify: _____

Name Address Phone

"I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed my employment may be terminated at any time.

In consideration of my employment, I agree to conform to the company's rules and regulations, and I agree that my employment and compensation can be terminated, without cause, and with or without notice, at any time, at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause, and with or without notice, at any time by the company. I understand that no company representative,other than it's president, and then only when in writing and signed by the president, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing."

_____

Date Signature

FOR OFFICE USE ONLY:

_____

Interviewed By Date

_____

Remarks

_____

_____

Neatness Ability

Hired: ☐ YES ☐ NO Position _____ Dept._____

_____

Salary/Wage Date Reporting to Work

_____

Approved Employment Manager Department Head General Manager

This form has been designed to strictly comply with State and Federal fair employment practice laws prohibiting employment discrimination.