

MASTER SERVICE CORPORATION
 Employment Application – Attach Resume if applicable

2553 Harrison Avenue
 Elkins WV 26241
 Telephone: (304)636-8170
 Fax: (304)636-8206
 msc@masterservicecorp.com

APPLICANT INFORMATION

Last Name		First		M.I.		Date	
Street Address						Apartment/Unit #	
City				State		ZIP	
Phone				E-mail Address			
Date Available			Social Security No.			Desired Salary	
Position Applied for							
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?				
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain				
Please indicate any state licenses that you hold:							

EDUCATION

High School				Address			
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College				Address			
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other				Address			
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

REFERENCES

Please list three professional references.

Full Name				Relationship			
Company				Phone			
Address							
Full Name				Relationship			
Company				Phone			
Address							
Full Name				Relationship			
Company				Phone			
Address							

PREVIOUS EMPLOYMENT

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature	Date
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Applicants for positions that require driving a commercial motor vehicle (CMV) at any time will be required to undergo controlled substances, and at our discretion, alcohol testing prior to employment and will be subject to further testing throughout their period of employment. Applicants will also be asked to sign forms for release of information from previous employers in all cases where driving a CMV was one of their employment functions. Failure to sign will prevent this employer from using you as a CMV driver.