



OFFICE USE ONLY

HIRE DATE: _____

PAY RATE: _____

MS or TN

603 Highway 32 East, Water Valley, MS 38965

Employee Information

Full Name: _____ Date: _____

DOB: _____ Sex: Male Female Other: _____

Address: _____ Apt/Unit #: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

Date Available: _____ Social Security No.: _____

Position Applied For: _____ Desired Salary: \$ _____

Do you possess a Driver's License? Yes No Driver License No.: _____

Are you a citizen of the United States? Yes No

If no, are you authorized to work in the United States? Yes No

Have you ever worked for this company? Yes No

If yes, when? _____

Have you ever been convicted of a felony? Yes No

If yes, please explain: _____

Are you capable of handling the physical demands of the job? Yes No

Education

High School Attended: _____ Address: _____

From: _____ to _____ Did you graduate? Yes No Diploma: _____

College Attended: _____ Address: _____

From: _____ to _____ Did you graduate? Yes No Degree: _____

Other: _____ Address: _____

From: _____ to _____ Did you graduate? Yes No Degree: _____

References

Please list three (3) professional references below

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 No

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 No

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 No

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, please explain: _____

Disclaimer & 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: _____

Authorization for Release of Background Information

By signing below, I hereby authorize the Company (**Mid South Communications, Inc.**) to procure and Verified Person (**Stephen Wood, MSC President**) to provide a consumer report and/or investigate consumer report on me for use in connection with my employment and my application for employment. I authorize all entities possessing information about me, including (but not limited to) governmental agencies and courthouses, educational institutions, present and former employers, and/or other information sources as limited by national and regional law, to release such information to Verified Person.

I understand that the information that can be released to Verified Person and its agents includes, but is not limited to, verification of Social Security number, current and previous residencies, criminal records and history, public court records, driving records, credit history and reports, bankruptcy filing, employment history, education, professional licenses and certifications, drug/alcohol testing results, and other information related to my character, general reputation, and mode of living.

I also understand that if the Company hires me, my consent will apply indefinitely, and the Company may obtain additional background reports pertaining to me from Verified Person and/or other consumer reporting agencies without asking for my consent again throughout my employment or contract period, unless I revoke or cancel my consent.

By signing below, I also certify the information I have provided on my employee application and related forms are true, complete, and accurate. I agree that this form, in its original, faxed, photocopied, or electronic (including electronically signed) form, will be valid for any consumer reports that may be requested by or on behalf of the Company.

Applicant Name (please print): _____

Applicant Signature: _____ **Date:** ____/____/____