

MAC'S FOOD STORE'S

EMPLOYMENT APPLICATION

Thank you for applying to Mac's Food Store's. Several interviews may be conducted with you in order to determine if you are the best candidate and to provide more detailed information regarding your work history and qualifications. Mac's Food Store's is a **DRUG-FREE WORKPLACE.** All Applicants must undergo drug testing as a condition of being employed and a confirmed positive drug test will result in a employment opportunity being withdrawn. Mac's Food Store's will conduct pre-and post-employment background checks which may include verification with the Social Security Administration, DMV, criminal courts, state and county repositories of criminal records, credit bureaus and prior employers and personal references. You will be required to sign the proper authorization forms. Falsification of information on this application or failure to provide information can result in disqualification or termination if discovered after hire.

I have read and understand and agree to the employee application process at Mac's Food Store's.

APPLICANT SIGNATURE _____

DATE _____

Please print legibly using ink.

APPLICANT INFORMATION

Last Name	First	M.I.
Street Address		Apartment/Unit #
City	State	ZIP
Phone	Are you at least 18 years of age: YES NO (if no, Date of Birth)	
Date Available	Are you currently employed? YES NO Desired Pay	
Position Applied For	Emergency Contact:	
Are you legally authorized to work in the U.S. YES NO		
Were you previously employed by Mac's Food Store's? YES NO If yes, when/where?		
EMAIL ADDRESS: _____		
List any friends or Relatives who work or have worked for Mac's Food Store's?	Name	Store Location Relationship
Have you been convicted of or pled no contest to a crime other than a minor traffic offense? (Note: A conviction will not necessarily disqualify you from employment.) YES NO If yes, explain		

AVAILABILITY

What type of employment are you seeking?

- Full-time (more than 30 hours per week?)
 Part-time (less than 30 hours per week?)

Number of hours you would prefer to work each week: _____

Maximum number of hours you can work each week: _____

How soon can you start working? _____

If hired, the days and hours that you have listed may be taken into consideration in our scheduling process. If you have any conflicts, please list them:

To help us consider you for a job that matches your availability, please tell us the earliest and latest times you can work each day by filling out the table below:

DAY	EARLIEST TIME	LATEST TIME	
SUNDAY			
MONDAY			
TUESDAY			
WEDNESDAY			
THURSDAY			
FRIDAY			
SATURDAY			

Note: Applications are active for 30 days. If you have not been contacted or hired within 30 days and wish to be considered for positions that become available at a later date, you must fill out a new application or update your application. Please do so in person.

EDUCATION (LIST ALL EDUCATIONAL EXPERIENCE)

High School/GED	Address
Did you graduate? YES NO	Degree
College/Trade School	Address
Did you graduate? YES NO	Degree

PREVIOUS EMPLOYMENT (BEGINNING WITH MOST RECENT/CURRENT EMPLOYERS)

Are you currently employed?	YES	NO	If yes, may we contact your current employer?	YES	NO
Company			Phone	()	
Address			Supervisor		
Job Title			Starting salary/wage	\$	Ending Salary/Wage \$
From	To		Reason for Leaving		
Eligible for re-employment?	YES	NO	If no, why		

Company			Phone	()	
Address			Supervisor		
Job Title			Starting salary/wage	\$	Ending Salary/Wage \$
From	To		Reason for Leaving		
Eligible for re-employment?	YES	NO	If no, why		

Company			Phone	()	
Address			Supervisor		
Job Title			Starting salary/wage	\$	Ending Salary/Wage \$
From	To		Reason for Leaving		
Eligible for re-employment?	YES	NO	If no, why		

PERSONAL REFERENCES (DO NOT INCLUDE FAMILY MEMBERS)

NAME	Occupation	Years Known
PHONE	Address	
NAME	Occupation	Years Known
PHONE	Address	

APPLICANT'S AGREEMENT AND CERTIFICATION: READ BEFORE SIGNING

I expressly authorize and request, without reservation, Mac's Food Store's, its representatives, employers and agents to contact and obtain information from all references, employers, public agencies, licensing authorities, and educational institutions, to otherwise verify the accuracy of all information provided by me in the application or job interview. I hereby waive any and all rights and claims I may have against such Company, its agents, employees, or representatives, for seeking, gathering and using such information in the hiring and employment process, and all other persons, corporations or organizations for producing such information about me. I release Mac's Food Store's and said persons or entities from any and all liability regarding same.

I understand that I will be required to undergo screenings for substance abuse (drugs) as a condition of my employment. I also understand that any employment relationship entered into between myself and Mac's Food Stores shall be for an indefinite term and said employment shall be terminable at the will of either party without cause. Mac's Food Store's is an Equal Opportunity Employer. Our Policy is to consider all applicants based on their qualifications and our current job vacancies. Applicants are considered without regard to race, color, religion, sex, national origin, age, disability or any other legally protected category.

Applicant's Signature: _____ Date: _____

Please return completed application along with the signed applicant drug and alcohol testing consent agreement, and background investigation consent form.

You may return to any of our physical locations:

Mac's #1

**101 Central Park Avenue
Pinehurst, NC 28374**

Mac's #3

**1391 N. Sandhills Blvd.
Aberdeen, NC 28315**

Mac's #4

**735 Sandpit Road
Aberdeen, NC 28315**

Mac's #7

**1216A Morganton Road
Southern Pines, NC 28387**

MAC'S FOOD STORE'S

Drug & Alcohol Testing Consent Agreement & Background Investigation Consent Form

These forms must be signed and returned with your completed application to be considered for employment

PLEASE READ EACH OF THESE DOCUMENTS CAREFULLY. RETURN WITH YOUR COMPLETED AND SIGNED APPLICATION. ANY APPLICATION RETURNED WITHOUT THESE DOCUMENTS SIGNED AND FILLED OUT APPROPRIATELY WILL REMOVE YOU FROM EMPLOYMENT CONSIDERATION WITH MAC'S FOOD STORES.

**SOUTHERN SALES OF ABERDEEN
DBA MAC'S FOOD STORES**

**Applicant Drug & Alcohol Testing
Consent Agreement**

As a prerequisite to employment, I hereby agree to allow Mac's Food Store's to collect urine samples from me to determine the presence of drugs or alcohol in my body. Further, I give my consent to the release of my test results to authorized Southern Sales management for appropriate review. I understand that the results of the drug/alcohol testing of my urine, if positive, will remove me from consideration for employment. I also understand that if I refuse to consent, I will be removed from further consideration for employment. Further, I understand that, if employed by Mac's Food Stores, I must abide by the terms of Southern Sales DBA Mac's Food Stores Drug & Alcohol Policy and may be required to submit to testing for the presence of drugs or alcohol for reasons stated in Southern Sales policy. I understand that submission to such testing is a condition of employment with Mac's Food Store's. Disciplinary action, up to and including discharge, may result for violating Southern Sales Drug & Alcohol Policy.

Applicants Signature

Witness's Signature

DATE

I hereby REFUSE the drug and alcohol detection urine test.

Applicants Signature

Witness's Signature

DATE

**SOUTHERN SALES OF ABERDEEN DBA
MAC'S FOOD STORES**

Background Investigation Consent Form

I _____, hereby authorize Mac's Food Stores and/or its agents to make an independent investigation of my background references, character, past employment, education, driving history, criminal or police records for the purpose of confirming the information contained on my application and/or obtaining other information which may be material to my qualifications for employment. Further, if hired by Mac's Food Stores, I understand and authorize that a periodic or updated background investigation may be requested for the duration of my employment, (for purposes including job promotion, changes in job title/responsibilities, transfers, security clearance function's, etc.). I release Mac's Food Stores and/or its agents any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims or law suits in regards to the information obtained from any and all of the above reference sources used. The following is my true and complete legal name and all information is true and correct to the best of my knowledge.

FULL PRINTED NAME

MAIDEN NAME OR OTHER NAMES USED

PRESENT ADDRESS _____ **Years/Months**

DOB _____ **SS#**

DL# _____ **STATE**

SIGNATURE

TODAY'S DATE