

PRE-EMPLOYMENT QUESTIONNAIRE EQUAL OPPORTUNITY EMPLOYER

DATE

PERSONAL INFORMATION	<u> </u>		001			
NAME (LAST NAME FIRST)		SSN				
PRESENT ADDRESS		CITY	Ś	STATE	ZIP CODE	
PERMANENT ADDRESS		CITY STATE ZIP COD			ZIP CODE	
PHONE NO.		REFERRED BY				
()						
EMPLOYMENT DESIRED						
POSITION		DATE Y	DATE YOU CAN START SALARY DESIRED			
ARE YOU YES EMPLOYED?	NO O		IF SO, MAY WE INQUIRE YES NO OF YOUR PRESENT EMPLOYER?		$\overline{}$	
EVER APPLIED TO YES THIS COMPANY BEFORE?	NO O	WHEN?				
EDUCATION	NAME AND LOCATION	N OF SCHOOL	YEARS ATTENDED G	RADUAT	E? SUBJECT STU	IDIED
GRAMMAR SCHOOL						
HIGH SCHOOL						
COLLEGE						
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL						
GENERAL						
SUBJECTS OF SPECIAL STUDY/RE OR SPECIAL TRAINING/SKILLS	SEARCH WORK					
U.S. MILITARY OR NAVAL SERVICE		RANK				

FORMER EMPLOYERS (LIST BELOW LAST FOUR EMPLOYERS, STARTING WITH LAST ONE FIRST) DATE NAME +ADDRESS OF EMPLOYER **SALARY** POSITION REASON FOR LEAVING MONTH + YEAR FROM TO **FROM** TO FROM TO FROM TO INDEPTH QUESTIONS PLEASE ANSWER THE FOLLOWING AS TRUTHFULLY AS POSSIBLE. Do you have a vaild drivers license and your own vehicle? _____ Have you every built a full fireplace. If so, how many? _____ Do you know how to construct a firebox and a smoke chamber? _____ How many years have you been a mason? _____ A hardscape installer? _____ Have you worked with cultured stone and real stone? What do you feel is your stongest assest about being a mason/hardscape installer? REFERENCES GIVE BELOW THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR. **YEARS** NAME **ADDRESS BUSINESS KNOWN** 1. 2. 3. **AUTHORIZATION** "I certify that the facts contained in this application are trye and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shll be grounds for dismissal. I authorize investigation of all statements contained herein and the references ands employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information. I also understand and agree that no representative of the company has any autority to enter into any agreement for employmeny for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative." ______ SIGNATURE ______ INTERVIEWED BY______DATE _____

DO NOT WRITE BELOW THIS LINE								
REMARKS								
NEATNESS	EATNESS CHARACTER							
PERSONALITY A			TY					
HIRED	FOR DEPT.	POSITION	WILL REPORT	SALARY WAGES				

THANK YOU FOR APPLYING! PLEASE MAIL ALL THREE APPLICATION PAGES TO:

Western Mass Masons c/o Employment Opportunities 383 College Highway Southampton, MA 01073

OR FAX YOUR APPLICATION TO:

(413) 203-1278

OR SCAN AND EMAIL YOUR APPLICATION TO:

Quality@WesternMassMasons.com

YOUR INFORMATION WILL BE REVIEWED AND KEPT ON FILE. WE WILL CALL YOU IF ANY POSITIONS BECOME AVAILABLE.