



Confidential

EMPLOYMENT HISTORY

This application has been given to you because of our sincere interest in properly considering your back-ground. Please fill it out carefully, for if you are empoeed, it will become part of your permanent record. Giving you this blank does not necessarily indicate there are any postions open and does not in any way obligate you or the company

Middle

First

Last

Name

Date

7940 Woodruff Court, Ravensworth Business Center, Springfield, VA 22151 (703) 321-8500
3100 Shawnee Drive, Winchester, VA 22601 (540) 662-3100
11001 Houser Drive, Suite 1, Fredericksburg, VA 22408 (540) 891-4400
4700 Eubank Road, Richmond, VA 23231 (804) 652-0090
3451 Simpson Ferry Road, Camp Hill, PA 17011 (717) 761-6611

EMPLOYMENT POLICY

The objective of Mid South's divisions and subsidiaries is always to search for the most qualified individual for every job opening. The individual skill, experience and personal capabilities of every job applicant will be carefully evaluated. Employment, training, advancement and pay will always be on the basis of qualification without regard to race, color, religion, sex, national origin, age or handicap.

Position Desired _____

Starting Salary Expected _____ When Available _____

Name _____ Social Security Number _____

Address _____ State _____ Zip Code _____

Home Phone _____ Business Phone _____ U.S. Citizen Yes No

EDUCATION

	Name and Location	Dates Attended		Major Subject	Minor Subject	Degree	Date Graduated	
		Mo	Yr				Mo	Yr
High School								
College								
Graduate School								
Technical Business or Other								

College Grade Average _____ Out of Possible _____ Rank in class _____ Top 1/4 _____ 2nd 1/4 _____ 3rd 1/4 _____ 4th 1/4 _____ Years of school _____

Foreign Language Skills _____ Speak _____ Read _____ Write _____

Met College Expenses _____ Working _____ % _____ Parents _____ % _____ Scholarship _____ % _____ Other _____ %

Please list part or full time jobs in college	College activities and offices held that do not reveal race, color, religion, sex national origin, age or handicap
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Are you licensed to practice any trade or profession? Yes No If yes, state nature of license, issuing authority and date

Please list professional, social, community or business activities and interests which do not reveal race, color, religion, sex, national origin, age or handicap:

EMPLOYMENT

List in order with most recent employer first. Include military service and periods of employment.

Company		Address		Reason for Leaving				
To Mo	Yr	Job Title	All Former Supervisors Names and Titles	No. of Employees Supervised	Base Salary Start	Total Earning Start		
From Mo						Finish		
						Finish		
Company		Address		Reason for Leaving				
To Mo	Yr	Job Title	All Former Supervisors Names and Titles	No. of Employees Supervised	Base Salary Start	Total Earning Start		
From Mo						Finish		
						Finish		
Company		Address		Reason for Leaving				
To Mo	Yr	Job Title	All Former Supervisors Names and Titles	No. of Employees Supervised	Base Salary Start	Total Earning Start		
From Mo						Finish		
						Finish		
Company		Address		Reason for Leaving				
To Mo	Yr	Job Title	All Former Supervisors Names and Titles	No. of Employees Supervised	Base Salary Start	Total Earning Start		
From Mo						Finish		
						Finish		
Earlier Employers		Address			From Mo	Yr	To Mo	Yr

General

Have you ever worked or applied for employment with Mid South or any of its divisions before? When? _____ Where? _____

Referred to Mid South by: _____

Names of friends and relatives employed by Mid South or its divisions _____

Willing to relocate? Geographical Preference _____ Willing to travel?

Do you possess a valid driver's license? Date obtained _____ License No and State _____

Driving Record: _____ Number of Points _____ Date of last violation _____

Have you ever been convicted of a crime other than a minor traffic violation? Yes No
If yes, explain: _____

HEALTH

Please give date of last health examination: _____ Reason for Examination _____ Findings _____

How much time have you lost from work in the past year? _____

Have you had treatments or consultation for any physical or mental disorders? Yes No

Nature of illnesses or problems: _____

Was recovery complete? Yes No
Describe any chronic conditions or disabilities which may affect your employment _____

REFERENCES

May we communicate with your present employer now? Yes No

If not, may we check anyone else in confidence concerning present position, such as clients and former employees?

Name _____ Company and Address _____ Phone _____

List business references whom we can contact now and who have knowledge of your employment and professional competence. Attempt to give up those who were superior to you, on equal level, and subordinates. Do not list Relatives or Personal Friends.

Name	Business Relationship	Address	Phone

EMERGENCY

In case of emergency, please notify _____ Day _____
Night _____

Name _____ Address _____ Phone _____ Relationship _____

Please read the following statement carefully before you sign

I understand that employment is contingent upon a comprehensive investigation of my records and references. I hereby authorize the company and its agents to conduct the investigation of my record, references, and credit rating. Moreover, I hereby release Mid South and their investigating agencies from any and all liability of whatever nature resulting from requesting such information. I also understand that in the event of my employment, I will be subject to immediate dismissal if I have deliberately made false or misleading statements in answer to questions contained in this application.

Signature _____ Date: _____