



Thank you for your interest in Magna Seating South Carolina!  
Please follow the instructions on this sheet when completing the Magna Seating South Carolina job application on the following pages.

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This document is a fillable PDF. Please follow these instructions to ensure your information is saved.

- 1. Complete a “Save As” of the application to your computer**
- 2. Type your information into the form**
- 3. Save again**
- 4. Attach the completed document in an email to [magna@mau.com](mailto:magna@mau.com)**

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**\*\*IF YOU DO NOT FOLLOW THESE INSTRUCTIONS, YOUR INFORMATION WILL NOT BE SAVED AND THE DOCUMENT WILL COME THROUGH BLANK.\*\***



*An Equal Opportunity Employer*

A person with a disability requiring accommodation for completing this application process, should notify Human Resources as soon as possible.

Date of Application: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Present Address: \_\_\_\_\_  
(Number) (Street) (City) (State) (Zip Code)

Former Address: \_\_\_\_\_  
(Number) (Street) (City) (State) (Zip Code)

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_  
(Area Code) (Area Code)

Position Desired: \_\_\_\_\_ Salary Expected \$ \_\_\_\_\_ per Year  
(1<sup>st</sup> Choice) (2<sup>nd</sup> Choice)

If hired, can you show proof of your eligibility to work in the US? Yes  No  If hired, can you show proof that you are at least 18 years of age? Yes  No

Will you now or in the future require sponsorship for employment visa status? (e.g. H1-B visa status, etc) Yes  No

Have you been convicted of, or pled guilty to a felony? Yes  No  When \_\_\_\_\_ Offense \_\_\_\_\_

Previously employed by any division of Magna or Magna? Yes  No  Dates: From \_\_\_\_\_ To \_\_\_\_\_ Which Location \_\_\_\_\_ Reason Left \_\_\_\_\_

Have you ever served in the US Armed Forces? Yes  No  Branch \_\_\_\_\_ Years in Service \_\_\_\_\_ Rank at Discharge \_\_\_\_\_

How did you learn about Magna? Newspaper Ad  Career Fair  Agency  Relative  (who) \_\_\_\_\_ Friend  (who) \_\_\_\_\_ Other  \_\_\_\_\_

| Education – Schools Attended        | City, State | Years Completed | Grade Average | Major Field of Study | Degree/Diploma/Certificate |
|-------------------------------------|-------------|-----------------|---------------|----------------------|----------------------------|
| High School                         |             | 9 10 11 12      |               |                      |                            |
| Undergraduate College or University |             | 1 2 3 4         |               |                      |                            |
| Undergraduate College or University |             | 1 2 3 4         |               |                      |                            |
| Commercial or Business              |             | 1 2 3 4         |               |                      |                            |
| Graduate or Other                   |             | 1 2 3 4         |               |                      |                            |

Extra Curricular Activities – Honors/Awards – Offices Held \_\_\_\_\_

| <b>Employment Record</b> - Account for your last four employers.<br>List most recent employer first.                               | <b>Dates</b> | <b>Position and Name of Supervisor</b> | <b>Brief Description of Duties</b> | <b>Rate of Pay</b> |
|--|--------------|--|------------------------------------|--------------------|
| Employer   | From:        | Job Title:                             |                                    | Start:             |
| Address City - State   | To:          | Supervisor:                            |                                    | End:               |
| Phone May we contact this employer?<br>Yes <input type="radio"/> No <input type="radio"/> Later <input type="radio"/> (when) _____ |              | Reason for Leaving:                    |                                    |                    |
| Employer   | From:        | Job Title:                             |                                    | Start:             |
| Address City - State   | To:          | Supervisor:                            |                                    | End:               |
| Phone May we contact this employer?<br>Yes <input type="radio"/> No <input type="radio"/> Later <input type="radio"/> (when) _____ |              | Reason for Leaving:                    |                                    |                    |
| Employer   | From:        | Job Title:                             |                                    | Start:             |
| Address City - State   | To:          | Supervisor:                            |                                    | End:               |
| Phone May we contact this employer?<br>Yes <input type="radio"/> No <input type="radio"/> Later <input type="radio"/> (when) _____ |              | Reason for Leaving:                    |                                    |                    |
| Employer   | From:        | Job Title:                             |                                    | Start:             |
| Address City - State   | To:          | Supervisor:                            |                                    | End:               |
| Phone May we contact this employer?<br>Yes <input type="radio"/> No <input type="radio"/> Later <input type="radio"/> (when) _____ |              | Reason for Leaving:                    |                                    |                    |

| <b>Business References (excluding relatives)</b> |              |               |                        |       |
|--|--------------|---------------|------------------------|-------|
| Contact Name                                     | Company Name | Contact Title | Address - City - State | Phone |
|  |              |               |                        |       |
|  |              |               |                        |       |
|  |              |               |                        |       |

**Additional Information** - Other special skills, knowledge and abilities which support your qualifications for the position you are seeking.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Availability Date: \_\_\_\_\_ Can you work any shift? Yes  No  If no, explain.

**Applicant: READ CAREFULLY BEFORE SIGNING**

- Magna Seating retains the right to verify all information provided by me. In the process of such verification, I fully authorize Magna Seating to contact any person, school, organization, or employer listed to disclose all information necessary to verify information or statements. I release all persons who disclose such information from any liability or damages to me or anyone acting in my name. I waive any written notice of the release of such information that may be required by any state or federal law.
- Any falsification, misrepresentation, or omission, whenever discovered, shall be considered legitimate and sufficient grounds for dismissal.
- If hired, my employment with Magna Seating is at-will. This means that I may terminate my employment at any time. Similarly, the company may terminate my employment at any time, with or without cause.

\_\_\_\_\_  
 (Signature) (Date)