

# Mackay Bar Outfitters & Guest Ranch, Inc

PO Box 340  
Grangeville, Idaho 83530  
208-413-2109 phone  
[info@mackaybarranch.com](mailto:info@mackaybarranch.com)

## REFERENCE QUESTIONNAIRE

This reference questionnaire has been developed to facilitate a rapid background check if the position for which you are being introduced is offered to you. Please complete the questionnaire and text or email it to Mackay Bar Outfitters & Guest Ranch, Inc.

NAME: \_\_\_\_\_  
Last First Middle

DATE \_\_\_\_\_

### 1. EMPLOYMENT HISTORY (Five years, most recent first).

Can current employer be contacted?  YES  NO  N/A

Company \_\_\_\_\_ Dates \_\_\_\_\_  
Full Address \_\_\_\_\_  
Your Title \_\_\_\_\_  
Supervisor's Name & Title \_\_\_\_\_  
Supervisor's Email \_\_\_\_\_

Company \_\_\_\_\_ Dates \_\_\_\_\_  
Full Address \_\_\_\_\_  
Your Title \_\_\_\_\_  
Supervisor's Name & Title \_\_\_\_\_  
Supervisor's Email \_\_\_\_\_

Company \_\_\_\_\_ Dates \_\_\_\_\_  
Full Address \_\_\_\_\_  
Your Title \_\_\_\_\_  
Supervisor's Name & Title \_\_\_\_\_  
Supervisor's Email \_\_\_\_\_

**2. REFERENCES**

Please list two individuals with whom you have worked recently on a day-to-day basis. .

Name \_\_\_\_\_  
Current Company & Title \_\_\_\_\_  
Telephone \_\_\_\_\_  
Dates of Association \_\_\_\_\_  
Company Where Associated \_\_\_\_\_  
Your Title \_\_\_\_\_  
His/Her Title \_\_\_\_\_  
Email Address \_\_\_\_\_

Name \_\_\_\_\_  
Current Company & Title \_\_\_\_\_  
Telephone \_\_\_\_\_  
Dates of Association \_\_\_\_\_  
Company Where Associated \_\_\_\_\_  
Your Title \_\_\_\_\_  
His/Her Title \_\_\_\_\_  
Email Address \_\_\_\_\_

3. Have you ever been convicted of a felony or any misdemeanor; or have you been formally charged with racial discrimination, harassment, or other criminal offense? (Do not include any traffic violations, juvenile offenses or military convictions, except by general court martial.)

YES  NO

If yes, furnish details of conviction, offense, location, date and sentence.

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

4. In the past three years, have you ever knowingly used any narcotics, amphetamines, or barbiturates, other than that prescribed to you by a physician?

YES  NO

If yes, please furnish details.

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

