



EMPLOYMENT APPLICATION

***Equal Opportunity Employer:** Company is an equal opportunity employer. Applicants are considered for positions without discriminating on the basis of race, color, religion, national origin, ancestry, sex (including gender identity or expression), sexual orientation, age, disability, genetic information, marital status, arrest and court record, credit history, domestic or sexual violence victim status, veteran/military status, citizenship status, or any other characteristic protected by federal, state, or local law.*

Date: _____ **Job/Position applying for:** _____

I. GENERAL INFORMATION

Location: _____

Last Name	First Name	Middle Initial
Street Address, City, State, Zip Code		
Email:		Phone:

Do you know anyone presently working for our company? ___ Yes ___ No

If so, who? _____

Do you have any previous beer/brewery/industry knowledge or experience? ___ Yes ___ No

If so, please describe experience:

II. AVAILABILITY (Please provide times on each day)

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY

Preferred # of hours per week? _____ OR please select: ___ Full Time ___ Part Time ___ Seasonal

III. EDUCATION/DEGREE: (List highest level attained)

	Name of School	No. of Years Completed	Course of Study	Degree Received
College/University				
High School				
Other				



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IV. EMPLOYMENT HISTORY: (Please begin with most recent position)

Employer Name:	Dates Employed: From:	Dates Employed: To:
Position Title:	Address:	Phone Number:
Reason for Leaving:	Supervisors Name:	May we contact? ___ Yes ___ No

Employer Name:	Dates Employed: From:	Dates Employed: To:
Position Title:	Address:	Phone Number:
Reason for Leaving:	Supervisors Name:	May we contact? ___ Yes ___ No

Employer Name:	Dates Employed: From:	Dates Employed: To:
Position Title:	Address:	Phone Number:
Reason for Leaving:	Supervisors Name:	May we contact? ___ Yes ___ No

Are you legally authorized to work in the United States? ___ Yes ___ No

It is the policy of this company to hire only U.S. Citizens and aliens who are authorized to work in this country. (As a condition of employment, you will be required to produce original documents establishing your identity and authorization to work, and to complete the U.S. Immigration and Naturalization Service's Form I-9.)

V. PROFESSIONAL REFERENCES: (Not relatives or friends)

Name:	Occupation:	Relationship:
Email:		Phone:
Name:	Occupation:	Relationship:
Email:		Phone:



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I, _____ (print name), CERTIFY THAT ALL ANSWERS AND DOCUMENTATION (HARD COPY AND/OR ELECTRONIC) GIVEN BY ME FOR OR RELATED TO THIS APPLICATION ARE TRUE, ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSIFICATION, MISREPRESENTATION OR OMISSION OF FACT ON THIS APPLICATION (OR ANY OTHER ACCOMPANYING OR REQUIRED DOCUMENTS) MAY RESULT IN DENIAL OF EMPLOYMENT OR IMMEDIATE TERMINATION OF EMPLOYMENT, REGARDLESS OF WHEN OR HOW DISCOVERED.

Questions regarding this application should be directed to any interviewer before signing. Submission or receipt of this application does not imply that the applicant will be employed.

I authorize the investigation of all statements and information contained in this application for purposes of considering my application for employment. I authorize the company to contact references provided for employment reference checks. In exchange for the company's consideration of my application for employment, I release the company and all providers of information (including but not limited to, any of my former employers, educational institutions attended, and references) from all liability relating to or arising out of any inquiry by the company regarding my work history, education, character, reputation, and background.

If hired, I agree to abide by all company rules and regulations, and understand that, if employed, my employment is "at will" and may be terminated with or without cause, and with or without written notice, at any time, at the option of either myself or the company. I further understand that this application is not a contract of employment and cannot create a contract of employment for any specific period.

I hereby consent to and authorize Beer Lab HI to make a full and complete investigation of my personal or employment history, and authorize any former employer, person, firm, corporation, school, credit agency, government agency or other entity to provide Beer Lab HI with any information (whether fact or opinion) they may have regarding me. In consideration of Beer Lab HI's review of my application for employment, I release and hold harmless Beer Lab HI and all providers of information from any and all liability arising from the disclosure or receipt of such information.

I hereby authorize the release of information for verification purposes and acknowledge that I have read and understand the above statements.

Applicant Signature

Date