

## **APPLICATION FOR EMPLOYMENT**

It is the continuing policy of Foothills Brewing to provide equal-opportunity employment to all employees and applicants, without regard to race, creed, color, sex, religion, national origin, citizenship, age, veteran status, disability, pregnancy or any other protected class of citizens.

This policy relates to all employment decisions, including those in connection with recruitment, hiring, training, promotion, compensation, benefits, termination and all other terms and conditions of employment.

PERSONAL INFORMATION			EDUCATION HISTORY		
Full Name:			Name of High School:		
Present Address:			Location of High School:		
			Years of High School Completed:		
Time at Present Address:			High School Degree: 🖸 YES 💆 NO		
Home Phone Num	ıber:				
Mobile Phone Number:			Name of College:		
<b>Are you</b> (for alcohol-related purposes): □ Over 18 □ Over 21			Location of College:		
Desired Position:			Years of College Completed:		
<b>Desired Salary</b> (b	e specific):		Major and Degree:		
	AVAILABILITY		· · · · · · · · · · · · · · · · · · ·		
	From	To	Name of Trade/Professional School:		
Sunday			Location of Trade/Professional School:		
Monday			Years of Trade/Professional School Completed:		
Tuesday			Major and Degree:		
Wednesday					
Thursday			Have you ever been convicted of a crime?		
Friday			If yes, explain the number of conviction(s), nature of offense(s) leading		
Saturday			to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. Be sure to explain		
How many hours can you work weekly?  Can you work nights?   YES   NO			in detail any conviction(s) relating to alcohol (driving while intoxicated, selling/providing alcohol to minors, etc.) as well as any felony conviction(s		
Employment Desi	<u> </u>	rt-time 🗆 Either			
If hired, when wo	uld you be able to start?		_		



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Date	Employer's Name	Employer's Address	s Salary	Position	Reason for Leavin
/ we contac	t your present employer?	🖸 YES 🔼 NO			
t any abilitie	s or special skills you po	ssess that would allow you to exce	el in this position:		
		REFE	RENCES		
ovide the nar	nes of three people not rela	nted to you that you have known for	r at least one year.		
Na	me	Business	Address	Phone	Time Acquainted
		AUTHO	RIZATION		
ertify that th	e facts contained in this a			that no representativ	e of Foothills Brewing
he best of m	y knowledge and I underst	oplication are true and complete and that, if employed, falsified	l also understand and agree has any authority to enter int	o any agreement for (	employment for any
he best of m tements on	y knowledge and I underst	oplication are true and complete and that, if employed, falsified bunds for dismissal as well as	I also understand and agree has any authority to enter int specified period of time, or to foregoing, unless it is in writi	o any agreement for o make any agreemen ng and signed by a r	employment for any t contrary to the
he best of m tements on s sible crimin	y knowledge and I underst the application shall be gr al and/or civil prosecution	oplication are true and complete and that, if employed, falsified bunds for dismissal as well as	I also understand and agree has any authority to enter int specified period of time, or to	o any agreement for o make any agreemen ng and signed by a r	employment for any t contrary to the

I authorize investigation of all statements contained herein and the references and employers listed above to give Foothills Brewing any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release Foothills Brewing from all liability for any damage that may result from utilization of such information.

This waiver does not permit the release or use of disability-related o medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws.

Signature:	Date: