

## LONGSHIP BREWING COMPANY

## **Application for Employment**



**Please carefully read and answer all questions.** You will not be considered for employment if you fail to completely answer all the questions on this application. You may attach a résumé, but all questions must be answered.

Position Applying For:				Last Name:								
PERSONAL DATA												
Name (last, first, r	middle)											_
Street Address and/or Mailing Address			City						State	Zip	Zip	
Home Telephone Number			Business Telephone Number				Cell Phone Number					
Date you can start work			Salary Desired				Do you have a High School Diploma or GED?  Yes ☐ No ☐					
POSITION II	NFORMATIO	N Check all that	you are willing to work				-					
Full Time  Part Time	Monday Start:			End: Wednesday Start: End: Saturday End: Thursday Start: End: End: End: Friday Start: End:						Start:End:		
Are you authorized	d to work in the U.S		basis?			7	5	Ye	s 🗌	No		_
Have you ever been convicted of a felony? (Convictions will not necessarily disqualify an applicant for employment.)  Yes   No   If yes, explain:												
computer/Point of	Sale terminal, lift o	bjects up to 50 lbs (	nd courteously with the occasionally more), reason without reasonable a	d/prepa	are/cook recip				verage, accur	ately count	t currency, operate a	
_	QUALIFICATIONS Please list any education or training you feel relates to the position applied for that would help you perform the work, such as schools, colleges, legrees, vocational or technical programs, and military training.											
		School Na	nme	>	Degree			A	Address/City/	State		
School			NAT.	1								
School			6		TON							
Other												
SPECIAL SKILLS List any special skills or experience that you feel would help you in the position that you are applying for (leadership, organizations/teams, etc.												
REFERENCE professional refere	Please list the ences, then list person	•	erences not related to yo	ou, with	full name, a	ldress, ph	none numb	er, and rel	ationship. If	you don't l	have three	
Name		Address/City/State			:			Ph	one	1	Relationship	

WORK HISTORY Start with your present or most recent ex	mployment and work back. Use separate	sheet if necessary. (INCLUDE PAID AND UNPAID POSITIONS)
Job Title #1	Start Date (mo/day/yr)	End Date (mo/day/yr)
Company Name	Supervisor's Name	Phone Number
City	State	Zip
Duties:		<b>I</b>
		ı
Reason for Leaving	Starting Salary	Ending Salary
May we contact your employers?	Yes No No	N/A
Job Title #2	Start Date (mo/day/yr)	End Date (mo/day/yr)
Company Name	Supervisor's Name	Phone Number
City	State	Zip
Duties:	0 19 9 19	
		P
Reason for Leaving	Starting Salary	Ending Salary
Job Title #3	Start Date (mo/day/yr)	End Date (mo/day/yr)
Company Name	Supervisor's Name	Phone Number
City	State	Zip
Duties:		
Reason for Leaving	LAWT Starting Salary	Ending Salary
	MICHICAN	,
Job Title #4	Start Date (mo/day/yr)	End Date (mo/day/yr)
Company Name	Supervisor's Name	Phone Number
City	State	Zip
Duties:		<b>-</b>
Reason for Leaving	Starting Salary	Ending Salary
I certify that the facts set forth in this Application for Emplalse statements, omissions or misrepresentations may result a this application and release the Employer from any liability. I acknowledge and understand that the company is an "at winay resign at any time, just as the employer may terminate the otice to the other party.	in my dismissal. I authorize the Em 7. The employer may contact any lis Il" employer. Therefore, any emplo	ployer to make an investigation of any of the facts set forth sted references on this application. yee (regular, temporary, or other type of category employee)
Applicant Signature	 Date	