

# APPLICATION FOR EMPLOYMENT GREAT BASIN BREWING CO

We offer equal employment opportunities to all persons without regard to race, religion, sex, creed, national origin, handicap or any other categories restricted by law. Federal law also prohibits discrimination because of age with respect to individuals who are at least 40 but less than 70 years of age. All statements made on this form and all other associated employment application documents will be carefully checked for accuracy. The use of this form does not mean that there are positions open and does not obligate us in any way.

**INSTRUCTIONS:** Please ***PRINT*** legibly. Complete all items. Items left blank may delay the processing of your application. If any item is not applicable to you, please write "N/A". Attach additional sheets if needed and your resume if available.

Name: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_  
(Last Name) (First Name) (Middle Initial) Date:

Present Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-Mail: \_\_\_\_\_

1. Have you applied for a job with us before?  Yes  No      Have you worked for us before?  Yes  No
2. How did you come to apply?  Referred - By: \_\_\_\_\_  Website/Ad  Walk-In
3. Are you a U. S. Citizen or locally domiciled as a resident alien with written authorization to work here?  Yes  No
4. Have you been convicted of a misdemeanor or felony in the past seven years?  Yes  No  
 If yes, explain: \_\_\_\_\_
5. Are you eligible to be bonded?  Yes  No      Have you ever been refused bond?  Yes  No  
 If yes, explain: \_\_\_\_\_
6. Do you currently have a valid Driver's License?  Yes - State: \_\_\_\_\_  No
7. Have you been convicted of any moving violations in the past four years?  Yes  No  
 If yes, explain: \_\_\_\_\_
8. Have you ever been discharged or requested to resign from a job(s)?  Yes  No  
 If yes, explain: \_\_\_\_\_
9. Are there days or times you cannot work?  Yes: When?: \_\_\_\_\_  No
10. How much time have you missed from work in the past two years other than holidays and vacations?: \_\_\_\_\_
11. Are you 21 years of age or older?  Yes  No    If no, employment subject to verification that you are of minimum legal age.
12. Position(s) applying for: \_\_\_\_\_
13. Are you capable of satisfactorily performing the essential duties of this job?  Yes  No  
 If no, explain: \_\_\_\_\_
14. Type of employment desired:  Full Time  Part Time - Days/Hours: \_\_\_\_\_
15. Range of pay expected: From: \_\_\_\_\_ to \_\_\_\_\_ per \_\_\_\_\_ When could you report to work? \_\_\_\_\_

**16. EDUCATIONAL BACKGROUND**

Type of School	Name of School	City/State/Zip	Level Completed	Major	Degree	Grade Ave
High School	_____	_____	_____	_____	_____	_____
College . . . .	_____	_____	_____	_____	_____	_____
Other . . . . .	_____	_____	_____	_____	_____	_____
Other training, knowledge, skills, job experiences not covered above: _____						

**17. PERSONAL REFERENCES**

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
(Street/PO Box) (City/State/Zip)

Telephone: (\_\_\_\_) \_\_\_\_\_ How do you know this person?: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
(Street/PO Box) (City/State/Zip)

Telephone: (\_\_\_\_) \_\_\_\_\_ How do you know this person?: \_\_\_\_\_

**18. EMPLOYMENT HISTORY**

**Instructions:** Begin with your most recent employer and list all jobs you have held for at least the last five years. Include summer and part-time jobs. Account for any periods of unemployment in the "Additional Comments" section below. We will not contact these employers without your permission (Yes/No boxes below).

1. Name . : \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_ Job Title(s): \_\_\_\_\_  
(Month/Year) (Month/Year)  
 Rate of Pay: Starting \_\_\_\_\_ per \_\_\_\_\_ Immediate Supervisor: \_\_\_\_\_  
 Ending \_\_\_\_\_ per \_\_\_\_\_ May we contact this employer?  Yes  No  
 Reason for leaving: \_\_\_\_\_

2. Name . : \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_ Job Title(s): \_\_\_\_\_  
(Month/Year) (Month/Year)  
 Rate of Pay: Starting \_\_\_\_\_ per \_\_\_\_\_ Immediate Supervisor: \_\_\_\_\_  
 Ending \_\_\_\_\_ per \_\_\_\_\_ May we contact this employer?  Yes  No  
 Reason for leaving: \_\_\_\_\_

3. Name . : \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_ Job Title(s): \_\_\_\_\_  
(Month/Year) (Month/Year)  
 Rate of Pay: Starting \_\_\_\_\_ per \_\_\_\_\_ Immediate Supervisor: \_\_\_\_\_  
 Ending \_\_\_\_\_ per \_\_\_\_\_ May we contact this employer?  Yes  No  
 Reason for leaving: \_\_\_\_\_

4. Name . : \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_ Job Title(s): \_\_\_\_\_  
(Month/Year) (Month/Year)  
 Rate of Pay: Starting \_\_\_\_\_ per \_\_\_\_\_ Immediate Supervisor: \_\_\_\_\_  
 Ending \_\_\_\_\_ per \_\_\_\_\_ May we contact this employer?  Yes  No  
 Reason for leaving: \_\_\_\_\_

19. Additional comments you feel would be important in considering your application: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**APPLICANT'S AGREEMENT AND CERTIFICATION**

I certify that the information given by me on this application form and all other application documents is true in all respects and I agree that, if employed and it is found to be false in any way, I may be dismissed without notice. I authorize the use of any information on this application and/or otherwise provided by me to verify my statements and I authorize my past employers, doctors, references, and any/all other persons to answer all questions asked regarding my ability, character and previous employment record. I expressly release all such parties from any liability or damages on account of having furnished such information.

If employed, I acknowledge that my employment is mutually terminable at will and that the first 90 days are considered an introductory period. Once employed, I further agree to submit to a physical examination, as provided for or restricted by law, whenever requested at no personal expense and agree that the examiner may disclose to the company or its representatives the results of such an examination. If employed, I expressly agree to abide by all present and subsequently issued company policies and procedures.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

# Great Basin Brewing Company

## Drug Testing Program

Great Basin Brewing Company has a vital interest in maintaining a safe, healthful and efficient working condition for its customers and employees. Using or being under the influence of drugs and/or alcohol on the job may pose serious safety and health risks not only for the user, but to the public and all those who work with the user. The possession, use or sale of an illegal drug or controlled substance may also pose unacceptable risks to safe, healthful and efficient operations.

To meet this compelling interest, individuals who wish to be considered for employment must agree to **Pre-Placement Drug Testing and Drug and Alcohol testing during employment, if so asked.**

By completing and signing this Notice and attached Application of Employment, the applicant understands and agrees to submit to drug and alcohol testing during the course of employment as provided in the Great Basin Brewing Company's Drug and Alcohol Policy. The applicant further understands and agrees to release Great Basin Brewing Company and its officers, agents, employees, parents, subsidiaries and affiliated concerns from any and all liability, claims, demands, damages and causes of action of every kind and nature arising out of or resulting from or in connection with submitting to drug and alcohol testing and any decision concerning employment made by the Great Basin Brewing Company in whole or in part, based upon the results of drug and alcohol testing. Furthermore, failure to attend a scheduled appointment for pre-placement testing may result in withdrawal of the offer of employment.

**ANY APPLICANT WHO IS UNWILLING TO AGREE TO THESE CONDITIONS SHOULD NOT APPLY FOR EMPLOYMENT WITH GREAT BASIN BREWING COMPANY.**

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Applicant's Signature

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Date