

Application for Employment

Please type or print clearly

It is the policy of AleSmith Brewing Company to provide employment, training, compensation, promotions, and other employment actions without regard to race, color, religion, gender, sexual preference, age, national origin, marital status, ancestry, disability, or veteran status. Disabled applicants may request accommodation in order to complete this application.

The following information, unless specifically noted, is essential. Failure to provide complete and accurate information will render your application invalid. Providing unrequested information may also render your application invalid.

Position Desired								Date									
ersonal Information	!							·	·								
First Name			Last Name														
Street Address					•		•		1	Apt #							
City					State	9		Zip	Code								
E-mail Address				Home Phone	lome Phone No.			·	Cell F No.	Phone							
How were you refer Website / Friend / E	red to us: mployee																
Employee Referral Name:					Other:												
Name of any relativ AleSmith Brewing (ntly emplo	yed by														
Have you ever appl	ied with u	s before?			If yes	s, give da	te										
Have you ever work	ed with u	s before?			If yes	s, give da	te										
Are you currently employed?			If yes, may be contact present employer?				your										
			Seeking:	Seeking:		Full-Time			Part-Ti	me	Ten	nporary					
			If offered employment, can you provide proof of authorization for employment in the United States?								Yes No						
Date available for employment If offered employme authorization for en	ent, can yo nploymen	ou provide p	proof of ed States?			Yes	ľ	lo									
employment If offered employme	nployment convicted	t in the Unit d of a felon	ed States? y in a court o	of law, or of ted offenses	convict	ed throug	jh a cou	ırt marti	al, durir ia Labor (ng the I Code §43	ast seven yea	ars?					

of Years

Complete

City / State

Name of College / Military / Trade School

Degree / Certificate Received

Yes

Major / Minor

N I	_
IN	n

Year

Awarded

Work Experi	ience	Pleas	se list your most r	recent job	history								
Last / Pres	ent			Hire I				End Da				ently	
Employer				Mo/ Y	′r.			Mo / Yr			Emp	loyed	
Address						City /	State /	Zip					
Position Title						Supe Name	rvisor e						
Phone Number				Starting F Hourly / S						ent / Ending ly / Salary	Pay		
Work Perfo	ormed	:											
Reason for	r leavi	ng:											
				T		ı							
Last / Pres Employer	ent			Hire I Mo/ Y				End Da Mo / Yr				ently loyed	
Address				1		City /	State /	Zip					
Position Title						Supe Name	rvisor						
Phone				Starting F	Pay			•		ent / Ending	Pay		
Number Work Perfo	ormed	:		Hourly / S	Salary				пош	ly / Salary			
Reason for	r leavi	ng:											
Last / Pres	ent			Hire I				End Da				ently	
Employer				Mo/ Y	′r.			Mo / Yr	.		Emp	loyed	
Address							State /	Zip					
Position Title						Supe Name	rvisor e						
Phone Number				Starting F Hourly / S	Pay Salary					ent / Ending ly / Salary	Pay		
Work Perfo	ormed	:											
Reason for	r leavi	ng:											
If you need add	ditional	snace nlease con	tinue on a separate sh	eet of naner									

Specialized Skills				
Please describe any specialized si List any licenses or certificates the			hat are related to the job for wh	nich you are applying?
	e the name, employer / r job qualifications. Do		number of three (3) busines	ss references we may contact
Name	Employer	Job Title	Email	Phone #
In connection with my submiss hereby affirm that the informat my knowledge and agree that f and result in termination of em	ion provided on this ap alse information or on	oplication (and accomp nissions may, at AleSmi	anying resume, in any) is tr	ue and complete to the best of
I authorize any persons, schoo (and accompanying resume, if an employment decision.				
I agree that AleSmith and my p tendered, is withdrawn or my e				
By my signature below, I under contact. Employment with Ale cause. In addition, all aspects be changed or eliminated with between me and an Officer of t legal right to work in the U.S.	Smith is at-will. This not my employment incompleted in the court motice or cause. The court motice or cause.	neans that AleSmith or cluding, but not limited this his at-will employment of	I can terminate employment to my position, compensation cannot be changed except be	t at any time without notice of on, benefits or work hours can by a signed written agreement
Signature		Da	ate:	

This application will be maintained in active status for six (6) months. If you wish to be considered for employment after six (6) months from the date of the application, you must complete and submit a new application.