

CROOKED FURROW
BREWING

Application for Employment

CROOKED FURROW BREWING IS AN EQUAL OPPORTUNITY EMPLOYER
Applicants are considered for all positions without regard to race, color, religion, sex, national origin, creed, age, marital or veteran status or the presence of non-job related medical conditions or disabilities.

Applicant Information:

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Date Available to Begin: _____

Position Applying For: _____

Are you a citizen of the United States? YES NO
 If no, are you authorized to work in the U.S.? YES NO

Do you have a valid Driver's License? YES NO

Have you ever been convicted of a felony? YES NO

If yes, explain: _____

Education

High School: _____ Address: _____
From: _____ To: _____ Did you graduate? YES NO Diploma: _____
College: _____ Address: _____
From: _____ To: _____ Did you graduate? YES NO Degree: _____
Other: _____ Address: _____
From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list three professional references.

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____
Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____
Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Previous Employment

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference? YES NO
Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference? YES NO
Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference? YES NO

What is your favorite beer, please describe its flavor profile in detail.

Describe the difference between an ale and a lager.

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in the application for employment as may be necessary in arriving at an employment decision. I understand that this application is not and is not intended to be a contract of employment.

In the event of employment, I understand that false or misleading information given in this application or interview(s) may result in discharge. Upon employment I understand that I am required to abide by all the rules and regulations of the Company.

Signature: _____ Date: _____

If you have a disability or need special consideration for access at Crooked Furrow Brewery, please talk with Management one day in advance and we will endeavor to make an effort to accommodate your needs.

Applicant Data Record

Applicants are considered for all positions, and employees are treated during employment without regard to race, color, religion, sex, national origin, creed, age, marital or veteran status, physical or mental disability. As employers, we comply with government regulation and affirmative action responsibilities. Solely to help us comply with the government record keeping, reporting and other legal requirements, please fill out the Applicant Data Record. We appreciate your cooperation. This data is for periodic government reporting and will be kept in a Confidential File separate from the Application for Employment.

Date of Application _____

(Please type or print clearly)

Name _____

Last

First

Middle

Address _____

Mailing address

City

State

Telephone (____) _____

Position(s) Applying For _____

Referral Source: ____Advertisement ____Friend ____Relative ____Walk-In
____Employment Agency ____other _____

Affirmative Action Survey

The government agencies require periodic reports on the gender, ethnicity, disability and veteran status of applicants. This data is for analysis and affirmative action only. Submission of this information is voluntary.

Check one: ____ Male ____ Female

Check one of the following:

Race/Ethnic Group: ____White ____Black ____Hispanic ____Native American ____Pacific Islander