

JOB APPLICATION

Eagles Landing Bottle Shoppe
100 Eagles Landing Pkwy, Stockbridge, Georgia 30281
7705075093

Eagles Landing Bottle Shoppe is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Should an applicant need reasonable accommodation in the application process, he or she should contact a company representative.

Please fill out all of the sections below:

Applicant Information

Applicant Name: _____
Address: _____
City, State and Zip Code: _____
Telephone Number: _____
Email Address: _____

Date of Application: _____

Employment Position

Position(s) applying for: Cashier/stock

How did you hear about this position? _____
What days are you available for work? _____
What hours or shift are you available for work? _____
On what date can you start working if you are hired? _____
Do you have reliable transportation to and from work? _____
Salary desired: _____

Personal Information

Have you ever applied to or worked for Eagles Landing Bottle Shoppe before? Yes No
If yes, when? _____

Do you have any friends, relatives, or acquaintances working for Eagles Landing Bottle Shoppe? Yes No
If yes, state name & relationship: _____

Are you 18 years of age or older? Yes No

Are you a U.S. citizen or approved to work in the United States? Yes No

What document can you provide as proof of citizenship or legal status?

Have you ever been convicted of a criminal offense (felony or misdemeanor)? Yes No

If yes, please state the nature of the crime(s), when and where convicted and disposition of the case:

Job Skills/Qualifications

Please list below the skills and qualifications you possess for the position for which you are applying:

(Note: Eagles Landing Bottle Shoppe complies with the ADA and considers reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions.)

Education and Training

High School

Name	Location (City, State)	Year Graduated	Degree Earned

College/University

Name	Location (City, State)	Year Graduated	Degree Earned

Vocational School/Specialized Training

Name	Location (City, State)	Year Graduated	Degree Earned

Military:

Are you a member of the Armed Services? _____

What branch of the military did you enlist? _____

What was your military rank when discharged? _____

How many years did you serve in the military? _____

What military skills do you possess that would be an asset for this position?

Previous Employment

Employer Name: _____

Job Title: _____

Supervisor Name: _____
 Employer Address: _____
 City, State and Zip Code: _____
 Employer Telephone: _____
 Dates Employed: _____
 Reason for leaving: _____

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 Job Title: _____
 Supervisor Name: _____
 Employer Address: _____
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 Employer Telephone: _____
 Dates Employed: _____
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 Job Title: _____
 Supervisor Name: _____
 Employer Address: _____
 City, State and Zip Code: _____
 Employer Telephone: _____
 Dates Employed: _____
 Reason for leaving: _____

References

Please provide 2 personal and professional reference(s) below:

Reference	Contact Information

Additional Information:

Social Security

Have you ever been in a situation where you had to solve a problem at your work without the supervisor in charge? If yes, please explain.

High school/college attended

How would you explain your customer relations skills?

AT-WILL EMPLOYMENT

The relationship between you and the Eagles Landing Bottle Shoppe is referred to as "employment at will." This means that your employment can be terminated at any time for any reason, with or without cause, with or without notice, by you or the Eagles Landing Bottle Shoppe . No representative of Eagles Landing Bottle Shoppe has authority to enter into any agreement contrary to the foregoing "employment at will" relationship. You understand that your employment is "at will," and that you acknowledge that no oral or written statements or representations regarding your employment can alter your at-will employment status, except for a written statement signed by you and either our Executive Vice-President/Chief Operations Officer or the Company's President.

Applicant Signature: _____

Dated: _____