



Dear Applicant:

Welcome to The Lakeville Brewing Company LLC. Prior to completing the application for employment, please understand that we are serious about creating a productive working environment for our staff and maintaining the highest levels of quality, service and attention for our guests. LBC on the Lake is a seasonal concept and will be open 7 days a week from Memorial Day weekend – Labor Day, after Labor Day hours will change as the season changes. We will be requiring ALL employees to be available for holidays and nights and weekends.

We want you to understand that we also believe in living in our values, some of which are:

- We believe in empowering our staff.
- We believe that good enough isn't.
- We believe in doing business in a professional and orderly manner.
- We believe in honesty and integrity.
- We believe that only a happy professional staff can give the level of personal service we demand.
- We believe in the ongoing training and development of our staff and see it as a worthy investment in the future of the company.
- We believe in providing legendary service- the unique and powerful sort of personal care and attention that our guests tell stories about.
- We believe being of service is a way of life.
- We believe that everyone is capable of being an A+ player.

If this feels like an environment for you, please complete the application.

# Application for Employment

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, disability, veteran status or any other legally protected status.

**\*\*\*PLEASE PRINT CLEARLY\*\*\***

Position(s) applied for \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

How did you find out about this job?  Newspaper  Employee  Walk-in  Relative  Other \_\_\_\_\_

Why are you seeking a new job at this time? \_\_\_\_\_

## APPLICANT INFORMATION

First Name \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Street Address \_\_\_\_\_ Social Security No. \_\_\_\_\_

City/ Zip \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_

If hired, do you have a reliable means of transportation to get to work? \_\_\_\_\_ Describe \_\_\_\_\_

Are you at least 18 year old? \_\_\_\_\_ If you are under 18 years of age, can you furnish a work permit? \_\_\_\_\_

Are you a legally eligible for employment in the U.S.? \_\_\_\_\_ (Proof of U.S. citizenship or immigration status is required if hired.)

Have you been convicted of a crime?  Yes  No (If yes, state the nature of the offense and disposition of the case. Include dates and places. (NOTE: The existence of a criminal record does not constitute an automatic bar to employment.)

Have you ever failed a liquor compliance check?  Yes  No

## EMPLOYMENT INFORMATION

Are you seeking full-time, part-time or temporary employment? \_\_\_\_\_

What hours and shift(s) would you prefer to work? \_\_\_\_\_

List times you are not available to work? \_\_\_\_\_

Are you willing to work overtime? \_\_\_\_\_ Weekends? \_\_\_\_\_ Holidays? \_\_\_\_\_

Are you currently employed? \_\_\_\_\_ If hired, when would you be able to start? \_\_\_\_\_

Have you ever worked for this organization before? \_\_\_\_\_ If yes, where and when? \_\_\_\_\_

List any friends or relatives employed by this company: \_\_\_\_\_

Have you ever been discharged or asked to resign from any position? \_\_\_\_\_ If yes, please describe: \_\_\_\_\_

If applicable, please refer to the attached job description for the position for which you are applying. Are you able to perform all these tasks with or without reasonable accommodation? \_\_\_\_\_ Please describe which tasks, if any, you will need accommodation to perform, and explain what type of accommodation you will need: \_\_\_\_\_

**EDUCATION (Circle highest level achieved)**

Elementary: 1 2 3 4 5 6 7 8

Secondary: 9 10 11 12 G.E.D.

College: 1 2 3 4 5 6 7 8

Name of School: \_\_\_\_\_

Name of School: \_\_\_\_\_

Name of School: \_\_\_\_\_

Location of School: \_\_\_\_\_

Location of School: \_\_\_\_\_

Location of School: \_\_\_\_\_

Degree & Major: \_\_\_\_\_

**WORK HISTORY (Please begin with most recent)**

May we contact the employers listed below? \_\_\_\_\_

1. Company \_\_\_\_\_ Phone\_( ) \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_

Job Title \_\_\_\_\_ Supervisor's Name & Title \_\_\_\_\_

Describe duties briefly: \_\_\_\_\_

Specific reasons for leaving: \_\_\_\_\_

2. Company \_\_\_\_\_ Phone\_( ) \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_

Job Title \_\_\_\_\_ Supervisor's Name & Title \_\_\_\_\_

Describe duties briefly: \_\_\_\_\_

Specific reasons for leaving: \_\_\_\_\_

3. Company \_\_\_\_\_ Phone\_( ) \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_

Job Title \_\_\_\_\_ Supervisor's Name & Title \_\_\_\_\_

Describe duties briefly: \_\_\_\_\_

Specific reasons for leaving: \_\_\_\_\_

Why should we hire you? \_\_\_\_\_

\_\_\_\_\_

**AUTHORIZATIONS & AT-WILL EMPLOYMENT AGREEMENT**

**(Please read carefully, then sign and date below)**

I certify that I have personally completed this application. I declare that the information provided in this employment application is true and complete and I understand that any false information or significant omissions may disqualify me from further consideration for employment and may be justification for my dismissal from employment if discovered at a later date. I agree to immediately notify this company if I should be convicted of a crime while my job application is pending or during my employment, if hired.

I authorize this company to make an investigation of all information contained in this employment application and I release from liability all companies and corporations supplying such information. I understand any false answers, statements, or implications made by me on this application or other required documents shall be considered sufficient cause for denial of employment or discharge.

I specifically authorize and direct my current and former employers to supply employment-related information to this company and do hereby release my current and former employers from liability for providing information to this company.

Upon termination of my employment for whatever reason, I release this company from all liability for supplying any information concerning my employment to any potential employer.

I hereby agree to submit any drug test required of me, whether prior to my employment or if employed by this company at any time thereafter.

**LIQUOR**

All staff members that serve alcohol are required to follow all local codes. All staff members are required to card for sales of alcohol. No service to intoxicated guests.

**NON COMPETE DISCLOSURE**

Any and all recipes, forms, and documents received will remain on the property of The Lakeville Brewing Company LLC. These documents can not be used in business of a similar nature.

**AT-WILL EMPLOYMENT AGREEMENT**

I understand and agree that nothing contained in this application, or conveyed during any interviews is intended to create an employment contract between the company and me. In addition, I understand and agree that if you employ me, in consideration of my employment, my employment and compensation will be at-will, for no definite period of time, and may be terminated at any time, for any reason, or for no reason at all. I understand that only the company’s President is authorized to change the employment-at-will status and such a change can only be done in writing. I have read, understand, and agree to the above.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name (Please Print) \_\_\_\_\_

-----**FOR OFFICE USE ONLY**-----

Date of Hire \_\_\_\_\_ Position \_\_\_\_\_

Rate of Pay \$ \_\_\_\_\_

Manager Signature \_\_\_\_\_