

# MOAB BREWERY APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer, dedicated to a policy of nondiscrimination in employment on any basis including race, color, age, sex religion, disability or national origin.

Date    /    /

## Employment Desired

<b>Position</b>	<b>Date You Can Start</b>	<b>Salary Desired</b>	<b>What shifts/days can you work?</b>

Are you employed now? YES  NO       If so, may we contact your present employer? YES  NO

Have you ever applied to this company before? YES  NO       When? \_\_\_\_\_

**Are you of legal age to serve alcohol?** YES  NO

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If hired, can you provide written evidence that you are authorized to work in the U.S.? YES  NO

## Personal Information

Last Name	First Name	Middle Name	
Address (Number, Street, City, State, Zip Code)			
Social Security Number	Date of Birth	Telephone Number	Referred By

## Education

High School Attended and Location	No. of Years Completed	Did you graduate?	
		Yes <input type="checkbox"/> No <input type="checkbox"/>	
College Attended and Location	No. of Years Completed	Did you graduate?	Degree
		Yes <input type="checkbox"/> No <input type="checkbox"/>	
Trade, Business or Correspondence School Attended and Location	No. of Years Completed	Did you graduate?	
		Yes <input type="checkbox"/> No <input type="checkbox"/>	

## General

Special Courses or Training \_\_\_\_\_

Experience/Skills Related to the Position for Which You Are Applying \_\_\_\_\_

## Employment History (List Present or Most Relative Positions First)

Name of Employer	Address (Number, Street, City, State, Zip Code)		
Phone	Department	Your Position	
Duties			
Name and Position of Immediate Supervisor			
Date Employed (Day, Month, Year)	Date Left (Day, Month, Year)	Starting Salary	Final Salary
Reason for Leaving			
Name of Employer	Address (Number, Street, City, State, Zip Code)		
Phone	Department	Your Position	
Duties			
Name and Position of Immediate Supervisor			
Date Employed (Day, Month, Year)	Date Left (Day, Month, Year)	Starting Salary	Final Salary
Reason for Leaving			

Name of Employer		Address (Number, Street, City, State, Zip Code)	
Phone	Department	Your Position	
Duties			
Name and Position of Immediate Supervisor			
Date Employed (Day, Month, Year)	Date Left (Day, Month, Year)	Starting Salary	Final Salary
Reason for Leaving			

State any additional information you feel may be helpful to us in considering your application.

**Other References**

Name	Phone	Occupation
Name	Phone	Occupation
Name	Phone	Occupation

**PLEASE ANSWER THE FOLLOWING QUESTIONS REGARDING THE POSITION YOU ARE APPLYING FOR:**

What does good customer service mean to you in the position you are applying for?

What type of personality do you have?

What makes you a good candidate for the position you are applying for?

Why do you want to work for the Moab Brewery?

Can you lift 25 pounds or more?

I certify that the information provided is true and correct. Date/Signature: \_\_\_\_\_