



# NORTH COAST BREWING CO., INC.

455 NORTH MAIN STREET FORT BRAGG, CA 95437 • 707-964-2739

## APPLICATION FOR EMPLOYMENT

Programs, services and employment are equally available to everyone.

Please inform the Human Resource Department if you require reasonable accommodation for the application or interview.

Position applied for: **Bartender**

Date: \_\_\_\_\_ How were you referred to us? \_\_\_\_\_

### PERSONAL INFORMATION

Full Name: \_\_\_\_\_

Present Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Permanent Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile /Other: \_\_\_\_\_ Email: \_\_\_\_\_

Date Available to Start: \_\_\_\_\_ Salary Requirement: \_\_\_\_\_

This position requires that you be over 21 years of age. Do you meet this requirement?  Yes  No

Are you legally allowed to work in the United States?  Yes  No

This position requires that you be able to lift 35 pounds frequently. Do you meet this requirement?  Yes  No

Have you ever worked for this company?  Yes  No If yes, when? \_\_\_\_\_

Type of employment desired:  Full-Time  Part-Time  Temporary  Seasonal

Are you willing to work:  Nights  Days  Weekends  Week days

### EDUCATION INFORMATION

High School or GED:	Address:	City:	State:	Degree:	Subjects Studied:
College:	Address:	City:	State:	Degree:	Major:
Graduate School:	Address:	City:	State:	Degree:	Major:
Other:	Address:	City:	State:	Degree:	Major:

**REFERENCES:** Give the names of three persons not related to you, whom you have known for at least one year.

Name	Address & Phone Number	Business	Years Acquainted
1.			
2.			
3.			

Summarize your special skills or qualifications: \_\_\_\_\_

\_\_\_\_\_

**EMPLOYMENT HISTORY - List below last three employers, starting with the most recent one first**  
**INFORMATION MUST BE COMPLETE, DO NOT ENTER "SEE RESUME"**

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Dates of Employment: From \_\_\_/\_\_\_/\_\_\_ TO \_\_\_/\_\_\_/\_\_\_ Position(s) Held: \_\_\_\_\_

Company Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference?  Yes  No

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Dates of Employment: From \_\_\_/\_\_\_/\_\_\_ TO \_\_\_/\_\_\_/\_\_\_ Position(s) Held: \_\_\_\_\_

Company Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference?  Yes  No

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Dates of Employment: From \_\_\_/\_\_\_/\_\_\_ TO \_\_\_/\_\_\_/\_\_\_ Position(s) Held: \_\_\_\_\_

Company Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference?  Yes  No

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**PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY**

- In consideration of my employment, I agree to conform to the policies and procedures of the company. I understand that In accepting this application, the company is in no way obligated to provide me with employment, and that I am not obligated to accept employment if offered. Furthermore, if employed, I understand that I am employed at will and that my employment and compensation can be terminated with or without cause, and with or without notice at any time.
- I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that any falsified statements on this application or omission of fact on either this application or during the pre-employment process will result in my application being rejected, or, if I am hired, in my employment being terminated.
- I also understand that any offer of employment is conditioned on the completion of pre-employment tests and documentation. I will, upon request, sign all necessary consent forms.
- I authorize you to make such investigations and inquiries of my personal, employment, educations, financial and other related matters as may be necessary for an employment decision. I hereby release employers, schools or individuals from all liability when responding to inquiries in connection with my application.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_