

NUCKOLLS

B R E W I N G C O .

EMPLOYMENT APPLICATION

Name _____
Address _____

Phone Number _____
Email _____
Today's Date _____

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. You must be 18 years or older to apply.

EMPLOYMENT DESIRED

Type of employment:

Part-time

Full-time

Position _____

Date you can start _____

EDUCATION

College _____

Location _____

Years completed 1 2 3 4+

Did you graduate? Yes No

Major _____

Degree Attained _____

High School _____

Location _____

Years completed 1 2 3 4+

Did you graduate? Yes No

Other Education _____

EMPLOYMENT HISTORY

Are you currently employed?

Yes

No

If so, may we contact your current employer?

Yes

No

| | | | | |
|---------------------|-----------------|-------------|---------------|-----------------|
| 1 | EMPLOYER | | EMPLOYED FROM | TO |
| | | | / / | / / |
| | SUPERVISOR NAME | ADDRESS | | PHONE NUMBER |
| SUPERVISOR POSITION | | CITY | STATE | ZIP CODE |
| YOUR POSITION | | YOUR DUTIES | | STARTING SALARY |
| REASON FOR LEAVING | | | | ENDING SALARY |

| | | | | |
|---------------------|-----------------|-------------|---------------|-----------------|
| 2 | EMPLOYER | | EMPLOYED FROM | TO |
| | | | / / | / / |
| | SUPERVISOR NAME | ADDRESS | | PHONE NUMBER |
| SUPERVISOR POSITION | | CITY | STATE | ZIP CODE |
| YOUR POSITION | | YOUR DUTIES | | STARTING SALARY |
| REASON FOR LEAVING | | | | ENDING SALARY |

| | | | | |
|---------------------|-----------------|-------------|---------------|-----------------|
| 3 | EMPLOYER | | EMPLOYED FROM | TO |
| | | | / / | / / |
| | SUPERVISOR NAME | ADDRESS | | PHONE NUMBER |
| SUPERVISOR POSITION | | CITY | STATE | ZIP CODE |
| YOUR POSITION | | YOUR DUTIES | | STARTING SALARY |
| REASON FOR LEAVING | | | | ENDING SALARY |

| | | | | |
|---------------------|-----------------|-------------|-------------|-----------------|
| 4 | EMPLOYER | | EMPLOYED TO | TO |
| | | | / / | / / |
| | SUPERVISOR NAME | ADDRESS | | PHONE NUMBER |
| SUPERVISOR POSITION | | CITY | STATE | ZIP CODE |
| YOUR POSITION | | YOUR DUTIES | | STARTING SALARY |
| REASON FOR LEAVING | | | | ENDING SALARY |

BUSINESS REFERENCES _____

Please list 3 references. People you have worked with are preferred. Do not include friends, relatives, or employers.

| 1. | NAME | OCCUPATION | WORK RELATIONSHIP | PHONE NUMBER |
|----|------|------------|-------------------|--------------|
| 2. | | | | |
| 3. | | | | |

BEER & WINE FAVORITES _____

List 4 of your favorite beer and/or wine recommendations

| 1. | MOVIE | COMMENTS |
|----|-------|----------|
| 2. | | |
| 3. | | |
| 4. | | |

GENERAL _____

Do you have a current NM Alcohol & Gaming Server Certificate? Yes No

Do you have a current Food Handler's Certificate? Yes No

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

I certify that the information provided is true and correct. I understand that I must present appropriate identification before beginning work and that I must be available to work evenings, weekends, and holidays.

APPLICANT'S SIGNATURE