

The Fermentorium Beverage Co.
7481 Hwy 60
Cedarburg, WI 53012

AN EQUAL OPPORTUNITY EMPLOYER
APPLICATION FOR EMPLOYMENT

Instructions: Please print, type, or write **clearly**. Your application can be properly evaluated only if you answer all of the questions carefully and completely.

This application will be considered current for six months from its date. After that period, a new application must be submitted, if you still desire employment with us.

Date _____

Name _____

(Please Print) Last First Middle Initial

Present Address _____

Street No. City State Zip

Previous Address _____

Street No. City State Zip

Telephone - Day: () Telephone-Other () _____

Position Sought: _____

Date Available to Begin Work: _____

Are you of legal age to sell beer in Wisconsin? _____

Have you successfully completed the Beverage Server Training Course? _____

Do you have a legal right to work in this country? _____ (proof will be required).

Are you related to any current employees of The Fermentorium Beverage Co? (If yes, who)

Have You Previously Applied for Employment at The Fermentorium Beverage Co? _____

If so, on what date? _____

Describe any education, training, or professional experience which you think qualifies you, or makes you a desirable candidate, for the position for which you are applying:

Rate of Pay Expected \$ _____ Would you work full-time? _____ part-time? _____

Specify days and hours desired _____

Do you have any activities, commitments or responsibilities (including other jobs or school) that might prevent you from meeting work schedules or attendance requirements?

If yes, please

explain: _____

General Information

Is there currently pending before any law enforcement official or court any charge alleging involvement by you in any criminal conduct (excluding minor traffic violations)? Yes No. If yes, please identify the charge and any other information you wish to have considered: _____

Have you ever pled guilty to or been convicted of any misdemeanor, felony, or other crime, other than minor traffic violations? (Include local ord. violations) Yes No

If yes, state the date of the conduct, and the date and court of the conviction/plea. On a separate sheet of paper describe the circumstances of the offense. _____

(Existence of a criminal record does not constitute an automatic bar to employment and your record will be considered only as it may substantially relate to the job for which you are applying).

Have you ever been discharged from employment for theft or alleged theft of money? merchandise? property? . Provide an explanation for any "yes" answer(s), if you wish: _____

Have you ever had your employment terminated, been asked to resign by an employer or quit a job without giving notice?

Yes No. If so, give details: _____

PHYSICAL REQUIREMENTS

The following is a description of some of the essential job duties and functions regularly required for the position(s) for which you are applying. Please answer "yes" or "no" for each of the following. A condition of employment is being able to perform the essential functions of the job with or without reasonable accommodations.

_____ Carry up to 35 pounds within store & to customer's car

_____ Bending or stooping

_____ Twisting

_____ Pushing/Pulling

_____ Reaching above shoulder level

_____ Climbing & working on step stools and 6 foot ladders

_____ Standing for a minimum of 4 hours at a time

_____ Lifting up to 50 to 150 pound cartons, sack, etc.

_____ Manual dexterity

Employment History (list present or most recent employment first and be sure to explain any gaps in employment over 3 months)

A. Name of Employer: _____ Telephone No. () _____
Date Started: _____ Date Ended: _____ Last Salary: _____
Job title and duties: _____

Name of Supervisor: _____
Reason for leaving or desiring change: _____

B. Name of Employer: _____ Telephone No. () _____
Date Started: _____ Date Ended: _____ Last Salary: _____
Job title and duties: _____

Name of Supervisor: _____
Reason for leaving or desiring change: _____

C. Name of Employer: _____ Telephone No. () _____
Date Started: _____ Date Ended: _____ Last Salary: _____
Job title and duties: _____

Name of Supervisor: _____
Reason for leaving or desiring change: _____

May we contact the employers listed? _____ If not, indicate which one(s) you do not wish us to contact. _____

References: List two (2) people familiar with your work. When possible, give local references. Omit minors and relatives.

1. Name: _____ Address: _____

Telephone No. () _____

How does this person know you, and for how long? _____

2. Name: _____ Address: _____

Telephone No. () _____

How does this person know you, and for how long? _____

The Fermentorium Beverage Co.
BACKGROUND INFORMATION RELEASE

Please fill out the following information accurately & completely. Please print legibly.

Date _____ / _____ / _____

Soc Sec Number _____

Full Legal Name _____

Street Address _____ How long? _____

City _____ State _____ Zip _____

Previous Address _____ How long? _____

City _____ State _____ Zip _____

Drivers License Number _____ State _____

Date of Birth* _____

*Information concerning your date of birth is only necessary to assist in the obtaining of information from the Department of Motor Vehicles and relevant Law Enforcement Agencies

I hereby authorize any employer, law enforcement agency, including but not limited to Georgia C.I.B., Kansas B of I., Massachusetts D.M.V./ and Minnesota Div of Labor/Workers Compensation, or other state agency, administrator, institution or private information bureau that has any record or knowledge of my credit, criminal, motor vehicle or employment history to communicate to The Fermentorium Beverage Co., any statements, matters or information relating to the aforesaid. A telephone facsimile or photocopy of this authorized release shall be as valid as the original. According to the fair credit report act, I am entitled to know if employment has been denied because of information obtained by my prospective employer from a consumer reporting agency or source of information.

Applicant's Signature _____ Date _____

PLEASE READ CAREFULLY BEFORE SIGNING:

I hereby give permission to The Fermentorium Beverage Co., and its employees to verify the information stated on this application. I understand The Fermentorium Beverage Co., may contact others for verification and amplification of this information. I release The Fermentorium Beverage Co., and its employees and agents and all persons contacted from all liability or claim(s) that may arise from such process. I certify the statements made in this application are true to the best of my knowledge and belief. I understand any misrepresentation may result in nonemployment, or discharge. I understand that if employed, my employment is for no definite period and that I may be terminated at any time for any reason, with or without cause.

I HAVE READ THE ABOVE PARAGRAPH AND UNDERSTAND IT.

Applicant's signature: _____ Date _____