



APPLICATION FOR EMPLOYMENT

As an equal opportunity employer, we are dedicated to a policy of non-discrimination in employment on any basis including age, sex, color, race, creed, national origin, religion, marital status, sexual orientation, political belief, or disability.

Note: Provide all the requested information on this application, even if it duplicates information on a submitted résumé.

Applied for Position(s) _____ Location: Brewery Pub Today's Date _____

PERSONAL DATA

Last Name	First	Middle	
			<input type="checkbox"/> 21 yrs of age or older <input type="checkbox"/> 18 yrs of age or older
Street Address	City	State	Zip Code
Home Telephone Number	Daytime Telephone Number	How were you referred to this company? _____	
Have you ever previously applied with <input type="checkbox"/> or worked for <input type="checkbox"/> us? Which facility & when? _____			

AVAILABILITY

Date available to start work _____

- I am available to work full time; any restrictions on my hours and days are noted below.
 I am available to work part time; any restrictions on my hours and days are noted below.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
X if no restrictions							
If restricted, note hours (from when to when) you are able to work							

EDUCATION

Last year of school completed _____ Complete for any education beyond high school/GED level:

School Name	Location (City & State)	Degree Earned	Area(s) of Study

SPECIAL SKILLS AND QUALIFICATIONS

Please list your specific skills, experience, or qualifications that are relevant to the applied for position(s), including volunteer activities, military assignments, educational courses, or certification. Please include dates and contact information, if applicable, for verification.

NOTE: List Work History on reverse side of application.

Description	Dates	Contact Person / Phone Number
	From To	
	From To	
	From To	
	From To	
	From To	

WORK EXPERIENCE

Note: List your current/most recent employment first.

May we contact your current employer? No Yes

Employer	City & State	Telephone	Supervisor Name/Title
Position & Duties/Responsibilities		Dates of Employment From To	Reason for Leaving
Employer	City & State	Telephone	Supervisor Name/Title
Position & Duties/Responsibilities		Dates of Employment From To	Reason for Leaving
Employer	City & State	Telephone	Supervisor Name/Title
Position & Duties/Responsibilities		Dates of Employment From To	Reason for Leaving
Employer	City & State	Telephone	Supervisor Name/Title
Position & Duties/Responsibilities		Dates of Employment From To	Reason for Leaving

OTHER

Have you ever been convicted of a felony? No Yes *If "Yes", please explain below.*

(A conviction will not automatically disqualify you from employment; we consider the date and nature of the offense and the specific position applied for.)

Note: Do not complete this section without reviewing the applicable job description(s).

Can you perform the essential functions, with or without accommodation, of the job(s) for which you are applying? No Yes

If "No", please explain below.

CERTIFICATION, RELEASE, & SIGNATURE

Note: Read the following statements carefully before signing. Only signed and dated applications are considered valid. If you have any questions regarding these statements, please ask before signing.

I certify that the facts set forth in this application (and résumé if submitted) are true and complete to the best of my knowledge. I understand that any false statement, omission or misrepresentation may result in the rejection of my application or if hired, for termination of employment.

I understand that consideration for employment is contingent on the results of reference and background checks.

I authorize Deschutes Brewery to investigate the truthfulness of all statements made on this application (and résumé if submitted) and to contact my former employers, or any other persons who can verify information. I authorize Deschutes Brewery to discuss the results of any investigation with all of their employees who are involved in the hiring process. I further authorize all contacted persons and former employers to provide information concerning this application, my background, and suitability for employment and I release each such persons and former employers from liability for providing such information.

Signature _____

Date _____

NOTE: This application is valid for only ninety (90) days from the date signed. To be considered for a position after ninety (90) days, please reapply.