

NINKASI BREWING COMPANY APPLICATION

272 Van Buren Street, Eugene OR 97402 • (541) 344-2739



Last Name First Name MI

Street Address

City State Zip Code

Home Phone Cell Phone Message Phone

Person to contact in case of emergency Phone

Transportation available: Car Bus Bike Ride Drivers License #: _____ State _____

Days available to work: Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Date you can start: _____ Shifts available to work: Days Swing Graveyard Hours available _____

Job you are seeking: _____ Experienced? Yes No

Have you ever worked for Ninkasi Brewing Co., LLC before? Yes No If yes, date(s) and reason for leaving? _____

Do you have any traffic infractions or DUIs in the last five years? Yes No If yes, please list all infractions or DUIs. _____

Have you been convicted of a felony in the last five years? Yes No If yes, what was the conviction for? _____

If you have ever been convicted of a felony, what type of parole / probation stipulations do you have? (e.g. Can't work out of town, have to check-in, etc.) _____

Employment History

Company Name From date To date May we contact? Yes No

Address City State Zip Code

Supervisor Name Phone

Duties Job title

Reason for leaving Ending Pay

Company Name From date To date May we contact? Yes No

Address City State Zip Code

Supervisor Name Phone

Duties Job title

Reason for leaving Ending Pay

Company Name From date To date May we contact? Yes No

Address City State Zip Code

Supervisor Name Phone

Duties Job title

Reason for leaving Ending Pay

Education

Name of High School _____ State _____ Graduate? Yes No If yes, year _____

Name of College / University _____ State _____ Graduate? Yes No If yes, year _____

Major Studies _____

If you are applying for a driving position, please list any traffic infractions you've had in the last three years:

It is important that you read and sign this section

I agree that the information on this application is correct and complete to the best of my knowledge and I understand that it shall be grounds for termination if any of the information contained herein is found to be untrue. I authorize you and all former employers, given by me as references, to answer questions and to give all information in connection with this application or in any way concerning me and understand that if accepted for employment, I will be working for you on your payroll. I understand that any information I learn while working for you is to be kept confidential. I agree, if employed by you, that if I ever make claims against you for personal injuries, upon request I shall submit to examinations by physicians of your selection. I will hold you harmless from any claims including, but not limited to, personal illness or injury as a result of providing false or misleading information on the application, or any succeeding paperwork. I herein acknowledge that my employment is "AT WILL" that may resign at anytime and the company may terminate my employment at anytime, with or without cause.

Employee Signature _____

Date _____

For office use only