

APPLICATION FOR EMPLOYMENT

Name

LastFirstMiddleMaiden

Present address

NumberStreetCityIslandPostal Box

How long

National Insurance No.

Telephone

D. O. B.

If under 18, please list age

Employment desired

☐ FULL-TIME ONLY☐ PART-TIME ONLY☐ FULL- OR PART-TIME

When available for work?

Position

| TYPE OF SCHOOL | NAME OF SCHOOL | LOCATION (Complete mailing address) | NUMBER OF YEARS COMPLETED | MAJOR & DEGREE |
|----------------------|----------------|--|---------------------------|----------------|
| High School | | | | |
| College | | | | |
| Bus. or Trade School | | | | |
| Professional School | | | | |

HAVE YOU EVER BEEN CONVICTED OF ANY CRIME?

☐ No☐ Yes

If yes, please explain.

DO YOU HAVE ANY DEPENDANTS? IF SO HOW MANY?

DO YOU HAVE A DRIVER'S LICENSE? ☐ Yes ☐ No

What is your means of transportation to work?

Driver's license number Expiration date

Please list two references other than relatives or previous employers.

Name

Position

Company

Address

Telephone

Name

Position

Company

Address

Telephone

Work Experience

Please list your work experience for the **past five years** beginning with your most recent job held. If you were self-employed, give firm name. **Attach additional sheets if necessary.**

| Name of employer Address City, Island Phone number | Name of last supervisor | Employment dates | Pay or salary |
|---|-------------------------|------------------|----------------|
| | | From To | Start Final |
| Your last job title | | | |

Reason for leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

| | | | |
|--|-------------------------|------------------|----------------|
| Name of employer Address City, Island Phone number | Name of last supervisor | Employment dates | Pay or salary |
| | | From To | Start Final |
| | Your last job title | | |
| Reason for leaving (be specific) | | | |
| List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company. | | | |
| Name of employer Address City, Island Phone number | Name of last supervisor | Employment dates | Pay or salary |
| | | From To | Start Final |
| | Your last job title | | |
| Reason for leaving (be specific) | | | |
| List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company. | | | |

May we contact your present employer? ☐ Yes ☐ No

Did you complete this application yourself ☐ Yes ☐ No

| |
|------------------------|
| If not, who did? _____ |
|------------------------|

| | | | |
|--|-------------------------|------------------|----------------|
| Name of employer Address City, Island Phone number | Name of last supervisor | Employment dates | Pay or salary |
| | | From To | Start Final |
| | Your Last Job Title | | |
| Reason for leaving (be specific) | | | |
| List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company. | | | |

AGREEMENT (PLEASE READ CAREFULLY BEFORE SIGNING)

I certify that all the information on this application is accurate and complete to the best of my knowledge and understand that misleading or false statements will constitute sufficient cause for refusal of hire or termination of my employment.

I understand that neither the acceptance of this application nor the subsequent entry into any type of employment relationship with Liquid Courage Ltd creates an actual or implied contract of employment. I understand that, if I accept employment with Liquid Courage Ltd, it will be on an at-will basis. This means that either Liquid Courage Ltd or I have the right to terminate the employment relationship at any time, for any reason, with or without cause.

I authorize Liquid Courage Ltd to investigate information concerning my education, employment experiences and all other aspects of my background relevant to my proposed employment. I release Liquid Courage Ltd and its employees from all liability arising from such investigation.

Signature of applicant _____ Date: _____

Liquid Courage Ltd is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with Liquid Courage Ltd depends solely on your qualifications.