

Equal access to employment is available to all persons. Those applicants requiring accommodations to the application and/or interview process should contact the General Manager. In consideration for employment, I agree to conform to Miller's Ale House Rules and Policies. **Miller's Ale House is an Equal Opportunity Employer.**

(Please Print)

Name: \_\_\_\_\_ Phone # \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

SS#: \_\_\_\_\_ Email \_\_\_\_\_ Applying for: \_\_\_\_\_ Desired income: \_\_\_\_/hour

- Are you employed now? \_\_\_\_\_ If so, may we contact your employer? \_\_\_\_\_ Date you can start: \_\_\_\_\_
- Are there any days or hours you will not work? Do you require any personal time off (vacation, holidays, weddings, etc.) over the next six months? If yes, explain: \_\_\_\_\_
- Have you been convicted of a crime in the last seven (7) years? Explain: \_\_\_\_\_  
(Such conviction may be relevant if job-related, but does not bar you from employment)

**Employment History**

**(Please identify any Miller's Ale House location you have previously been employed )**

(List below your last three employers, starting with the most recent one first)

◆ From \_\_\_\_\_ to \_\_\_\_\_ Employer \_\_\_\_\_ City/State \_\_\_\_\_  
 Phone \_\_\_\_\_ Managers Name \_\_\_\_\_ Last Position \_\_\_\_\_  
 Last Rate of Pay \_\_\_\_\_ Reason for leaving \_\_\_\_\_

◆ From \_\_\_\_\_ to \_\_\_\_\_ Employer \_\_\_\_\_ City/State \_\_\_\_\_  
 Phone \_\_\_\_\_ Managers Name \_\_\_\_\_ Last Position \_\_\_\_\_  
 Last Rate of Pay \_\_\_\_\_ Reason for leaving \_\_\_\_\_

◆ From \_\_\_\_\_ to \_\_\_\_\_ Employer \_\_\_\_\_ City/State \_\_\_\_\_  
 Phone \_\_\_\_\_ Managers Name \_\_\_\_\_ Last Position \_\_\_\_\_  
 Last Rate of Pay \_\_\_\_\_ Reason for leaving \_\_\_\_\_

Describe any educational training or experience that you believe is relevant to the job you have applied for: \_\_\_\_\_

If you are currently in school, please list your school schedule: \_\_\_\_\_

In case of an emergency contact: \_\_\_\_\_

I certify that answers given herein are true and complete. I understand that falsified statements, failure to identify any previous Ale House employment history or omissions of facts shall disqualify me from further consideration or if employed, will be grounds for dismissal. I authorize the Ale House to make investigations and inquires of my personal and employment history. I hereby release the Ale House from all liability that may result from utilization of such information. I acknowledge that this application will remain active for 60 days from this date and I also acknowledge that my employment with the Ale House is temporary for the first 90 days and is for no specific term, I may be terminated at any time, during or after my first 90 days, with or without cause or notice. Further, I acknowledge that Ale House has a requirement that employees be paid electronically.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_