



# DUTCH BROS COFFEE

## Join the Mafia



### Employment Application

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Thank you for your interest in joining the Dutch Bros. Team!

You may think you are applying to work for a company that is in the “coffee business,” but at our core, Dutch Bros. is in the relationship business...and great coffee is simply our medium. Developing relationships with our customers at the window, out in the communities or simply during our daily life is a huge part of why we do what we do.

All of our employees learn our three core values – Speed, Quality, and Customer Service – no matter what their position. Smiles are given away freely every day and supplies are limitless.

So if you have a servant heart and desire to make someone’s day, read on, fill in the blanks and turn your application in. The experience may be a life-changer!



### How to complete this application.

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1. Print neatly, using an ink pen, so your answers are easy to read. If you need more space, – no problem– just attach an additional sheet of paper.
2. Answer all the questions completely. If you have questions regarding the application, or the job you are applying for, feel free to ask the hiring manager.
3. After you have answered the questions and read all the information, sign and date the application.
4. Return the completed application to the stand at which you are applying. We will review it, and contact you if further action is required.



### Equal Opportunity Employer

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Dutch Bros does not discriminate on the basis of race, sex, color, religion, sexual orientation, age or any other factors made unlawful under applicable federal and state laws. All personnel decisions are made without prejudice or discrimination, in accordance with the principles of equal opportunity.

# Position Applying For: \_\_\_\_\_



## Personal Information

NAME (First, Middle, Last) \_\_\_\_\_

OTHER NAME(S) YOU HAVE USED AT WORK OR SCHOOL \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

SOCIAL SECURITY NUMBER (Optional) \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY, STATE, ZIP CODE \_\_\_\_\_

HOW LONG HAVE YOU LIVED AT YOUR CURRENT ADDRESS? \_\_\_\_\_

Are you under the age of 18?

☐ Yes

☐ No

If "yes," can you, after employment, show proof of age?

☐ Yes

☐ No

If hired, are you able to submit proof that you are legally eligible for employment in the United States?

☐ Yes

☐ No

Do you have reliable transportation to get to and from work?

☐ Yes

☐ No

The U.S. Secretary of Health and Human Services has determined that certain diseases, including hepatitis A, salmonella, shigella, staphylococcus, streptococcus, giardia, and campylobacter, may prevent you from serving food or handling food equipment in a sanitary or healthy fashion. An essential function of this job involves serving food or handling food equipment in a sanitary and healthy fashion. Can you, with or without reasonable accommodation, perform this essential function of this job?

☐ Yes

☐ No

Have you ever been convicted of a felony, a crime involving dishonesty, or a crime involving violence to another person? If "yes," please describe, including dates charged, penalties, and current disposition. Note: convictions are not an automatic disqualification from employment.

☐ Yes

☐ No



## Availability

Sunday		Monday		Tuesday		Wednesday		Thursday		Friday		Saturday	
FROM	TO	FROM	TO	FROM	TO	FROM	TO	FROM	TO	FROM	TO	FROM	TO
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____

If hired when could you begin work? (Month/Day/Year) \_\_\_\_\_



## Education

Name	City, State	# Of Yrs Completed	GPA	Degree/Diploma
_____	_____	_____	_____	<input type="checkbox"/> Still Attending
High School	_____	_____	_____	_____
_____	_____	_____	_____	_____
College Or Trade School	_____	_____	_____	_____
_____	_____	_____	_____	_____
Other	_____	_____	_____	_____

## Work Experience (Check this box ☐ if you have chosen to attach a resume.)

Company (Name, City, State)	Position & Duties	Supervisor Name & Phone	Dates Of Employment (Mm/Yy)	Reason(S) For Leaving
May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No			Ending wage: \$_____	
May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No			Ending wage: \$_____	
May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No			Ending wage: \$_____	

## References

LIST THREE SCHOOL, WORK OR PERSONAL REFERENCES WHO WE MAY CONTACT.  
DO NOT LIST PEOPLE WHO ARE RELATED TO YOU.

NAME	TELEPHONE NUMBER	HOW LONG HAVE YOU KNOWN THIS PERSON?	RELATIONSHIP TO YOU	TYPE OF REFERENCE
				<input type="checkbox"/> SCHOOL <input type="checkbox"/> WORK <input type="checkbox"/> PERSONAL
				<input type="checkbox"/> SCHOOL <input type="checkbox"/> WORK <input type="checkbox"/> PERSONAL
				<input type="checkbox"/> SCHOOL <input type="checkbox"/> WORK <input type="checkbox"/> PERSONAL

## Application Statement:

READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING THIS APPLICATION.  
ONLY APPLICATIONS THAT ARE SIGNED AND DATED ARE CONSIDERED VALID.

1. The information I am presenting in this application is complete, true and correct to the best of my knowledge. I understand that any falsification, misrepresentation, or omissions could result in the denial of my application, withdrawal of any other employment offers, or immediate discharge.

2. I authorize Dutch Bros to solicit information regarding my character, general reputation, credit, previous employment and similar background information, and to contact any and all references I have given on my application. I hereby release all parties and persons connected with any such request for information from all claims, liabilities and damages for any reason arising out of the furnishing of such information. If employed, I release Dutch Bros from any liability for future references it may provide regarding my work history with Dutch Bros

3. If employed, I agree to conform to the rules and regulations of Dutch Bros and understand that I will be an employee at-will, and my employment may be terminated at any time by me or Dutch Bros with or without notice, for any reason.

4. In consideration of my employment, I agree that my employment and compensation is at-will and can be terminated with or without cause, and with or without notice at any time, at the option of either Dutch Bros or myself. I understand that no representative of Dutch Bros has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to my status as an at-will employee.

5. For information about an employee's rights under the Family Medical Leave Act please go to [www.dutchbros.com/AboutUs/ContactUs](http://www.dutchbros.com/AboutUs/ContactUs) and select "Job Opportunities."

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_