GENERAL

APPLICATION FOR EMPLOYMENT

Little Pub Company

AN EQUAL OPPORTUNITY EMPLOYER

We do not discriminate on the basis of race, color, religion, national origin, sex, age over 40, disability, sexual orientation, marital status, genetic information or any other status protected by law or regulation. It is our intention that all qualified applicants are given equal opportunity and that selection decisions be based on job-related factors.

PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date. I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements. I understand I may be required to successfully pass a drug screening examination. I hereby consent to a pre- and/or post-employment drug screen as a condition of employment, if required. I understand that if I am extended an offer of employment it may be conditioned upon my successfully passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

I UNDERSTAND THAT THIS APPLICATION, VERBAL STATEMENTS BY MANAGEMENT, OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. ONLY THE PRESIDENT OF THE ORGANIZATION HAS THE AUTHORITY TO ENTER INTO AN AGREEMENT OF EMPLOYMENT FOR ANY SPECIFIED PERIOD AND SUCH AGREEMENT MUST BE IN WRITING, SIGNED BY THE PRESIDENT AND THE EMPLOYEE, IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE.

I have read, understand, and by my signature consent to these statements. Signature:_ Date: This application for employment will remain active for a period of three months. Ask LPC's HR representative for details. PLEASE PRINT, except for signature at the top of application. Answer each question fully and accurately. No action can be taken on this application until you have answered all questions. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information. _____ Job Applied For _____ Store/Location Name Are you seeking: Full-time Part-time Temporary Days Nights Other When could you start work? Todav's Date Middle Name Last Name First Name Telephone Number Present Street Address City State Zip Code № П (If you are hired, you may be required to submit proof of age.) No \square (If you are hired, you may be required to submit proof of age.) If hired, you will be required to furnish proof of your eligibility to work in the U.S. Have you ever applied with Little Pub Company before? Yes No If yes, when/where? Were you ever employed with Little Pub Company before? Yes \(\simega\) No \(\simega\) If yes, when/where?_____ How did you learn of Little Pub Company? If referred, by who? ____ If employed, do you expect to be engaged in any additional business or employment outside of our job? Yes 🗌 No \square If yes, give details ____ For Driving Jobs Only: Do you have a valid driver's license? Class of License _____ State Licensed In__ Driver's License Number Have you had your driver's license suspended or revoked in the last 3 years? Yes ☐ No ☐ If yes, give details _____

LIST NAME AND ADD	RESS OF SCHOOLS	Number of Years Completed	Diploma/ Degree/ Certificate	Subjects Studied
High School or GED:			Certificate	
College or University:				
Vocational or Technical:				
What skills or additional	training do you have that re	elate to the job for which you are applyi	ng?	
What machines or equip	oment can you operate that	relate to the job for which you are apply	ring?	
including military service	ce and any periods of une	n present or last employer listed first. employment. If self-employed, give fi ceptable references from current and former	rm name and supply	
NAME OF EMPLOYER		JOB TITLE AND DUTIES		
ADDRESS		DATES OF EMPLOYMENT (MO/YR): FF	ROM TO	
CITY, STATE, ZIP CODE		REASON FOR LEAVING		
		REASON FOR LEAVING		
SUPERVISOR(S)	TELEPHONE			
NAME OF EMPLOYER		JOB TITLE AND DUTIES		
ADDRESS		DATES OF EMPLOYMENT (MO/YR): FF	ROM TO	
CITY, STATE, ZIP CODE		REASON FOR LEAVING		
SUPERVISOR(S)	TELEPHONE			
NAME OF EMPLOYER		JOB TITLE AND DUTIES		
ADDRESS		DATES OF EMPLOYMENT (MO/YR): FF	ROM TO	
CITY, STATE, ZIP CODE		REASON FOR LEAVING		
SUPERVISOR(S)	TELEPHONE			
Have you worked or attended school under any other names?			Yes 🗌	No 🗌
If yes, give names: Are you presently employed? If yes, do you authorize us to contact them (please provide contact info)?			Yes 🗌	No 🗌
Have you ever been fired from a job or asked to resign? If yes, please explain:			Yes	No 🗌
		er employers (name & contact info):		