

An Equal Opportunity Employer

Please Print		Application Date	9
Last Name	First Name	Middle	
Home phone			
Email address			
Present Address			
No. and Street	City	State	Zip Code
Permanent Address (if different from pre	sent address)		
No. and Street	City	State	Zip Code
Employment Desired			
	Des	ired Salary:	
Are you applying for: Regular full-time work?Yes Would you be available to work overtime If hired, what date can you start work? Are you currently employed?Yes Other than time off for reasons related to you are unavailable to work?	No No o your religion, a disability or a medical c	ondition, are there any d	lays or times when
Personal Information			
How did you hear about this job opening Have you ever applied to or worked for A	?	Referred by:	
Have you ever applied to or worked for A If yes, when?		YesNo	
If hired, would you have a reliable means Are you at least 18 years old?Yes (If under 18, hire is subject to verification Are you able to perform the essential fur accommodation?YesNo	s of transportation to and from work? No n that you are of minimum legal age.)	ring, either with or witho	
(Note: We comply with the Fair Employment and Hous measures that may be necessary for eligible applicants skill and agility tests.)		. ,	

Education and Training

Indicate Years of Education Completed: High

i School C	College/University	Voc/Bus	Other: Specify _
------------	--------------------	---------	------------------

Do you have any other experience, training, qualifications, or skills that make you especially suited to work?	Yes	No
If yes, please explain:		

Employment History

List below all present and past employment starting with your most recent employer (last five years is sufficient). You must complete this section even if attaching a resume.

Name of Employer:	Start Date: End Date:	
Type of Business:	Current employer (Yes or No):	
Address and Street:	City:	
State and Zip Code:	Supervisors Name:	
Position Title:	Employer Number:	
Position Duties:	May we contact for reference (Yes or No):	
Reason for Leaving:		

Name of Employer:	Start Date:	End Date:		
Type of Business:	May we contact for refe	May we contact for reference (Yes or No):		
Address and Street:	City:			
State and Zip Code:	Supervisors Name:	Supervisors Name:		
Position Title:	Employer Number:	Employer Number:		
Position Duties:	Reason for Leaving:	Reason for Leaving:		

Name of Employer:	Start Date:	End Date:	
Type of Business:	May we contact for refer	May we contact for reference (Yes or No):	
Address and Street:	City:		
State and Zip Code:	Supervisors Name:		
Position Title:	Employer Number:		
Position Duties:	Reason for Leaving:	Reason for Leaving:	

Name of Employer:	Start Date:	End Date:	
Type of Business:	May we contact for reference (Yes or No):		
Address and Street:	City:		
State and Zip Code:	Supervisors Name:		
Position Title:	Employer Number:		
Position Duties:	Reason for Leaving:	Reason for Leaving:	

Name of Employer:	Start Date:	End Date:	
Type of Business:	May we contact for ref	May we contact for reference (Yes or No):	
Address and Street:	City:		
State and Zip Code:	Supervisors Name:		
Position Title:	Employer Number:		
Position Duties:	Reason for Leaving:	Reason for Leaving:	

References

List below three persons not related to you who have knowledge of your work performance within the last three years.

First/Last Name:	Phone Number:	Occupation:	Years Known:

Please Read Carefully, Initial Each Paragraph and Sign Below

- Initials I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.
- Initials Initials Initials I hereby authorize Advance Beverage Company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment (excluding criminal background information) unless otherwise specified above. I further authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.
- I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the Company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the Company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the Company's designated representative.

In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire.

The Company will consider qualified applicants, including those with criminal histories, in a manner consistent with state and local "Fair Chance" laws.

Date

Applicant's Signature