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, 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 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.

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.

This application	Signature:					Date:				
This application	for employment will remain	n active for a period of	three months. Asl	(LPC's HR re	presentative for deta	ails.				
PLEASE PRINT, except fo this application until you had questions are intended to in	ave answered all que	estions. In reading	g and answer	ing the foll	owing questions	s, be awar				
Store/Location Name	Job Applied For									
Are you seeking: Full-time	e 🗌 Part-time 🗌	Temporary \square	Days 🗌	Nights	Other 🗌					
When could you start work	?				Today's Date					
Last Name	First Name	Mide	dle Name			Telephor	ne Number			
Present Street Ad	ddress	City		State		Zip Code				
Are you 18 years of age or (If you are hired, you may be r	older?	of age.)					Yes	No 🗌		
Are you 21 years of age or (If you are hired, you may be r	older?	of age.)					Yes 🗌	No 🗆		
If hired, you will be required to furnish proof of your eligibility to work in the U.S.										
Have you ever applied with	n Little Pub Co. before	e? Yes 🗌 N	o ☐ If yes,	when/whe	re?					
Have you ever applied with Were you ever employed w										
Were you ever employed w	vith Little Pub Co. be	fore? Yes 🗌 N	o 🗌 If yes,	when/whe	re?					
	vith Little Pub Co. be rganization? If referr cted of any law violati	fore? Yes	o If yes,	when/whe	re?					
Were you ever employed we how did you learn of our or have you ever been convict include any plea of "guilty" If yes, give details	vith Little Pub Co. being anization? If referrected of any law violation "no contest." (Exc	fore? Yes \(\simeq\) N ed, by who? \(\simeq\) ion? lude minor traffic	o ☐ If yes,	when/whe	re?					
Were you ever employed we how did you learn of our or have you ever been convict include any plea of "guilty" If yes, give details	rganization? If referred of any law violation "no contest." (Except necessarily disqualify to be engaged in an	fore? Yes Ned, by who? ion? Idude minor traffic an applicant for employ additional busing	o If yes, violations.)	when/whe	re?		Yes 🗌	No 🗆		
Were you ever employed we how did you learn of our or have you ever been convict include any plea of "guilty" If yes, give details (A conviction will not or employed, do you expect or employment outside of conviction will not outside outside of conviction will not outside o	rganization? If referred of any law violation "no contest." (Except necessarily disqualify to be engaged in an	fore? Yes Ned, by who? ion? Ilude minor traffic an applicant for emply additional busin	o If yes, violations.)	when/whe	re?		Yes 🗌	No 🗆		
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			Number of	Diploma/	Subjects					
E	LIST NAME AND ADDR		Years Completed	Degree/ Certificate	Studied					
U		High School or GED:								
C	College or University:									
A T	Vocational or Technical:									
 	What skills or additional training do you have that relate to the job for which you are applying?									
N	What machines or equipment can you operate that relate to the job for which you are applying?									
W o	List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references. Note: A job offer may be contingent upon acceptable references from current and former employers.									
R K H	NAME OF EMPLOYER		JOB TITLE AND DUTIES							
I S	ADDRESS		DATES OF EMPLOYMENT (MC	D/YR): FROM	ТО					
Т	CITY, STATE, ZIP CODE		PAY: START \$	FINAL \$						
O R Y	SUPERVISOR(S)	TELEPHONE	REASON FOR LEAVING							
	NAME OF EMPLOYER		JOB TITLE AND DUTIES							
	ADDRESS		DATES OF EMPLOYMENT (MC	D/YR): FROM	ТО					
	CITY, STATE, ZIP CODE		PAY: START \$	FINAL \$						
	SUPERVISOR(S)	TELEPHONE	REASON FOR LEAVING							
	NAME OF EMPLOYER		JOB TITLE AND DUTIES							
	ADDRESS		DATES OF EMPLOYMENT (MC	D/YR): FROM	ТО					
	CITY, STATE, ZIP CODE		PAY: START \$	FINAL \$						
	SUPERVISOR(S)	TELEPHONE	REASON FOR LEAVING							
R E F	Have you worked or attended school under any other names?									
F E R	Are you presently employed? Yes If yes, do you authorize us to contact them (please provide contact info)?									
R E N	Have you ever been fired fr	from a job or asked to resign?								
C E S	Give two references, not re	elatives or former employers. Address		Phone						