



**LIQUOR**



**ROOKIES**  
TAPHOUSE AND EATERY

# EMPLOYMENT APPLICATION

APPLICANT INFORMATION					
Last Name		First		M.I.	Date
Street Address				Apartment/Unit #	
City		State		ZIP	
Phone		E-mail Address			
Date Available:		Social Security #:		Desired Salary:	
Position Applied for:			Referred By:		
<input checked="" type="checkbox"/> Preferred shift: 1 <sup>st</sup> Shift 6:00am-2:00pm _____ 2 <sup>nd</sup> Shift 2:00pm-10:00pm _____ 3 <sup>rd</sup> Shift 10:00pm-6:00am _____					
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	
		YES <input type="checkbox"/>	NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	
Have you ever worked for this company?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?	
Have you ever been convicted of a felony or a misdemeanor?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain	
Are you at least 18 years of age?		YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Are you at least 21 years of age?		YES <input type="checkbox"/>	NO <input type="checkbox"/>		
How did you hear about us?					
EDUCATION					
High School			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
REFERENCES					
<i>Please list two professional references.</i>					
Full Name			Relationship		
Company			Phone ( )		
Address					
Full Name			Relationship		
Company			Phone ( )		
Address					



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**PREVIOUS EMPLOYMENT**

Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

**MILITARY SERVICE**

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

**DISCLAIMER AND SIGNATURE**

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature \_\_\_\_\_ Date \_\_\_\_\_

PLEASE COMPLETE THIS **EMPLOYMENT APPLICATION**, SIGN & DATE, AND EMAIL TO **JOBS@JUMARINC.COM**  
**OR FAX TO 877-288-4030**  
**CAN'T EMAIL OR FAX? CHECK OUR WEBSITE FOR DATES WE WILL BE ACCEPTING YOUR APPLICATION**  
**AT THE NEW STORE LOCATION. THANK YOU!**