Finger Lakes Distilling LLC Application for Employment

Applicant Name:	Date:
Contact Information:	
Phone#: Add	ress:
Email:	
Are you at least 18 years of age? □Yes □I	<u>Vo</u>
Are you eligible to work in the U.S.? □Yes	□No
Available Start Date:	
Weekly Availability:	7,0
Seasonal Availability:	
Prior Work Experience:	
1). Name of Company:	2
Position Held:	O O
Date started employment:	Date Ended:
2). Name of Company:	
Position Held:	listi
Date started employment:	Date Ended:
Date Started employment.	Date Eliqed.
Education:	
High School:	Graduated?: □Yes □No
1). College:	Area of Study:
Degree:	ITTI
2). College:	Area of Study:
Degree:	

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References			
1.	Name:	Phone #:	
	Relationship:	Length of Time Known:	
2.	Name:	Phone #:	
	Relationship:	Length of Time Known:	
3.	Name:	Phone #:	
	Relationship:	Length of Time Known:	
		7.0	
<u>How</u>	did you hear about us?:	.0,	
		9	
accurate information and certify that I have done so. If the organization discovers at any time that I failed to completely and honestly provide any information requested of me in this Employment Application or during the interview process, I understand that my application will no longer be considered or, if I am working for the organization, that I will be subject to disciplinary action, up to and including termination of employment. The organization is committed to compliance with the provisions of this nation's immigration laws regarding verification of employment eligibility. Any offer of employment will be contingent upon your ability to provide legally sufficient documentation showing your eligibility to be employed by this organization. Applicants or employees that present fraudulent documents for employment verification purposes will be terminated. I authorize the organization to contact anyone that it deems appropriate to verify the information I have provided or to further investigate my background, past performance and suitability for employment. I consent to being discussed by any person contacted by the organization and waive all rights to bring any action for defamation, invasion of privacy or any similar claim against anyone that provides information to the organization with a good faith belief that the information provided is true. I understand that the organization may choose to obtain background information about me from a consumer reporting agency. Before requesting a report from a consumer reporting agency, the organization will ask for my authorization. I understand that if I refuse to provide such authorization, my application for employment will not be considered. I understand that this Employment Application is not an offer of employment. I understand that nothing contained in this Employment Application creates a contract between the organization and me for employment or any other benefit. No promises regarding employment have been made and I understand that no such promise or guaran			

Signature:

Date: