

Job Application for Fifth Ward Brewing Co.

1009 S. Main Street
Oshkosh, WI 54902

Phone: 920-479-1876

Personal Information

| | | | | | |
|--|--------------------------|---|--|---|--------------|
| Last | First | MI | SSN# | Email | |
| Street Address | City | ST | Zip | Home Phone | Mobile Phone |
| Are you a legal citizen of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No | | Are you 21 or older? <input type="checkbox"/> Yes <input type="checkbox"/> No | | If yes, Date of Birth | |
| Have you been convicted of a felony or been incarcerated in connection with a felony in the past seven years? <input type="checkbox"/> Yes <input type="checkbox"/> No | | If yes, please explain: | | | |
| Military Service? <input type="checkbox"/> Yes <input type="checkbox"/> No | | Branch | | Are you a veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| What position are you applying for? | | How did you hear about this position? | | | |
| Expected Hourly Rate | Expected Weekly Earnings | Date Available | Do you hold a valid Wisconsin Drivers License? | | |

Prior Work Experience

| | Current or Most Recent | Prior | Prior |
|----------------------------|--|--|--|
| Employer | | | |
| Address | | | |
| City, ST, ZIP | | | |
| Telephone | | | |
| Name of Supervisor/Manager | | | |
| Dates of Employment | From To | From To | From To |
| Position/ Job Title | | | |
| Pay | | | |
| Reason for Leaving | | | |
| May We Contact | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Education

| Name/Location | Last Year Complete | Degree | Major or Emphasis |
|--|--------------------|--------|-------------------|
| High School | 9 10 11 12 | | |
| College/University | 1 2 3 4 | | |
| Trade School | | | |
| Other | | | |
| List any applicable special skills, training or proficiencies. | | | |

| | | |
|---|-----------|------|
| <p>Disclaimer - By signing, I hereby certify that the above information, to the best of my knowledge, is correct. I understand that falsification of this information may prevent me from being hired or lead to my dismissal if hired. I also provide consent for former employers to be contacted regarding work records.</p> | Signature | Date |
|---|-----------|------|

Please List 3 Non-Family References with contact information