## **Standard Application for Employment**

It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, disability or other protected classifications.

Please carefully read and answer all questions. You will not be considered for employment if you fall to completely answer all the questions on this application. You may attach a résumé, but all questions must be answered.

| "Employer" Tri   | Γown           | Butcher               | Co. LLC                            | Pos     | sition apply  | ying for    |                            |  |               |            |           |           |  |
|--|----------------|-----------------------|------------------------------------|---------|---------------|-------------|----------------------------|--|---------------|------------|-----------|-----------|--|
| DEDCONAL DAT   |                |                       |                                    |         |               |             |                            |  |               |            |           |           |  |
| PERSONAL DAT. Name (last, first, middle)   |                |                       |                                    |         |               |             |                            |  |               |            |           |           |  |
| Street Address and/or Ma   | City           |                       |                                    |         |               |             | State                      | Zip  | Zip           |            |           |           |  |
| Home Telephone Number  |                |                       | Business Telephone Number          |         |               |             | Cellular 7                 | Cellular Telephone Number                        |               |            |           |           |  |
| Date you can start work  |                |                       | Salary Desired Do                  |         |               |             |                            | Oo you have a High School Diploma or GED? Yes No |               |            |           |           |  |
| POSITION INFO  | RMATIO         | N Check all that      | you are willing to work            |         |               |             |                            |  |               |            |           |           |  |
| Hours: Full Time Days  |                |                       | Swing Graveyard Graveyard Weekends |         |               |             | Status: Regular  Temporary |  |               |            |           |           |  |
| Are you authorized to we   | ork in the U.S | . on an unrestricted  | basis?                             |         |               |             |                            | Ye   | s 🔲           | No         |           |           |  |
| Have you ever been convicted of a felony? (Convictions will not necessarily disqualify an applicant for employment.)  Yes No If yes, explain:  |                |                       |                                    |         |               |             |                            |  |               |            |           |           |  |
| Have you been told the essential functions of the job or have you been viewed a copy of the job description listing the essential functions of the job?  Yes No                                  |                |                       |                                    |         |               |             |                            |  |               |            |           |           |  |
| Can you perform these essential functions of the jet many the  |                |                       |                                    |         |               |             |                            |  |               |            |           |           |  |
| QUALIFICATIONS Please list any education or training you feel relates to the position applied for that would help you perform the work, such as schools, colleges, degrees, vocational or technical programs, and military training. |                |                       |                                    |         |               |             |                            |  |               |            |           |           |  |
| School N   |                |                       | nme Degree                         |         |               |             |                            | Address/City/State                               |               |            |           |           |  |
| School   |                |                       |                                    |         |               |             |                            |  |               |            |           |           |  |
| School   |                |                       |                                    |         |               |             |                            |  |               |            |           |           |  |
| Other  |                |                       |                                    |         |               |             |                            |  |               |            | va        |           |  |
| SPECIAL SKILLS   | S List any sp  | ecial skills or exper | ience that you feel wou            | ld help | you in the po | osition tha | t you are ap               | plying fo  | r (leadership | , organiza | tions/te  | ams, etc. |  |
|  |                |                       |                                    |         |               |             |                            |  |               |            |           |           |  |
|  |                |                       |                                    |         |               |             |                            |  |               |            |           |           |  |
|  |                |                       |                                    |         |               |             |                            |  |               |            |           |           |  |
|  |                |                       |                                    |         |               |             |                            |  |               |            |           |           |  |
| REFERENCES<br>professional references,   |                |                       | erences not related to yo          | ou, wit | th full name, | address, pl | hone numbe                 | r, and re  | lationship. I | f you don' | 't have t | three     |  |
| Name   |                | Address/City/State    |                                    |         |               |             | Pł                         | ione   | Relationship  |            |           |           |  |
|  |                | 10 10 E               |                                    |         |               |             |                            |  |               |            |           |           |  |
|  |                |                       |                                    |         |               |             |                            |  |               |            |           |           |  |
|  |                |                       |                                    |         |               |             |                            |  |               |            |           |           |  |

| WORK HISTORY Start with your present or most recent  | employment and work b  | nack. Use separate sheet if neces  | sary. (INCLUDE PAID AND UNPAID POSITIONS  |  |  |  |
|--|--|--|---|--|--|--|
| Job Title #1   | Start Date (mo   | /day/yr)   | End Date (mo/day/yr)  |  |  |  |
| Company Name   | Supervisor's N   | ame  | Phone Number  |  |  |  |
| City   | State  | 7 22 11  | Zip   |  |  |  |
| Duties:  |  |  |   |  |  |  |
| Reason for Leaving   |  | Starting Salary  | Ending Salary   |  |  |  |
| May we contact your present employer?  | Yes 🗌  | No □ N/A□  |   |  |  |  |
| Job Title #2   | Start Date (mo   | /day/yr)   | End Date (mo/day/yr)  |  |  |  |
| Company Name   | Supervisor's N   | ame  | Phone Number  |  |  |  |
| City   | State  |  | Zip   |  |  |  |
| Duties:  |  |  |   |  |  |  |
| Reason for Leaving   |  | Starting Salary  | Ending Salary   |  |  |  |
| Job Title #3   | Start Date (mo   | /day/yr)   | End Date (mo/day/yr)  |  |  |  |
| Company Name   | Supervisor's N   | атте   | Phone Number  |  |  |  |
| City   | State  |  | Zip   |  |  |  |
| Duties:  |  |  |   |  |  |  |
| Reason for Leaving   |  | Starting Salary  | Ending Salary   |  |  |  |
| Job Title #4   | Start Date (mo   | /day/yτ)   | End Date (mo/day/yτ)  |  |  |  |
| Company Name   | Supervisor's N   | ame  | Phone Number  |  |  |  |
| City   | State  |  | Zip   |  |  |  |
| Duties:  |  |  |   |  |  |  |
| Reason for Leaving   |  | Starting Salary  | Ending Salary   |  |  |  |
| I certify that the facts set forth in this Application is imployed, false statements, omissions or misrepresentations et forth in this application and release the Employer from at I acknowledge and understand that the company is imployee) may resign at any time, just as the employer may rewithout notice to the other party. | may result in my dis-<br>ny liability. The emp<br>s an "at will" employe | missal. I authorize the Emplo<br>loyer may contact any listed<br>er. Therefore, any employee | yer to make an investigation of any of the fac<br>references on this application.<br>(regular, temporary, or other type of category |  |  |  |
| pplicant Signature   |  | Date   |   |  |  |  |