

**Childress Winery, LLC**  
**APPLICATION FORM**  
 AN EQUAL OPPORTUNITY EMPLOYER

Applicants are not required to give any information prohibited by law. Our employment policies are nondiscriminatory with respect to age, sex, sexual orientation, race, creed, marital status, color, national origin, disability, religion, citizenship status, disabled veterans and Vietnam era veterans' status, or any other legally protected status.

( PLEASE PRINT IN INK )

Date available for work:	Position Preferred and Starting Rate/Salary Required
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**PERSONAL**

FIRST NAME	MIDDLE NAME	LAST NAME	PREVIOUS LAST NAME
CELL PHONE NUMBER		HOME PHONE NUMBER	
CURRENT ADDRESS (STREET, CITY, ST, ZIP)			HOW LONG?
LAST PREVIOUS ADDRESS (STREET, CITY, ST, ZIP)			HOW LONG?

Are You Eighteen Years of Age or Older?  Yes  No (If hired, you MUST furnish proof of age)

Are You Legally Permitted To Work in the U.S. on a Full-Time Job Without Restrictions?  Yes  No

Have You EVER Been Convicted of ANY Offense in a Criminal or Military Court, excluding traffic violations, and including conviction of driving under the influence or driving while impaired?  Yes  No ( If "Yes", complete the section below )

**Conviction is not an automatic disqualification to employment**

DATE	PLACE	CHARGE	DISPOSITION

**EDUCATION**

	NAME OF SCHOOL	NUMBER CREDIT YEARS	DEGREE TYPE	DEGREE (Y/N)	MAJOR OR COURSE OF STUDY	DATE	NO. YRS. ATTENDED
	LOCATION (CITY and STATE)						
High School						N/A	
College/Trade/ Tech School		1	2	3	4		
GED EQUIVALENCY							
CERTIFICATION <input type="checkbox"/> Yes <input type="checkbox"/> No						YEAR RECEIVED	

**WORK EXPERIENCE (Give Most Recent Position First )**

NAME OF PRESENT OR LAST EMPLOYER	PHONE	START DATE	END DATE
ADDRESS		START SALARY	PER
LAST POSITION HELD	IMMEDIATE SUPERVISOR	END SALARY	PER
DUTIES		AMOUNT OF BONUS/COMMISSION	
WHY DID YOU LEAVE?			MAY WE CONTACT THIS EMPLOYER?
PREVIOUS EMPLOYER	PHONE	START DATE	END DATE
ADDRESS		START SALARY	PER
LAST POSITION HELD	IMMEDIATE SUPERVISOR	END SALARY	PER
DUTIES		AMOUNT OF BONUS/COMMISSION	
WHY DID YOU LEAVE?			

NEXT PREVIOUS EMPLOYER		PHONE	START DATE	END DATE
ADDRESS			START SALARY	PER
LAST POSITION HELD	IMMEDIATE SUPERVISOR		END SALARY	PER
DUTIES			AMOUNT OF BONUS/COMMISSION	
WHY DID YOU LEAVE?				

  

NEXT PREVIOUS EMPLOYER		PHONE	START DATE	END DATE
ADDRESS			START SALARY	PER
LAST POSITION HELD	IMMEDIATE SUPERVISOR		END SALARY	PER
DUTIES			AMOUNT OF BONUS/COMMISSION	
WHY DID YOU LEAVE?				

Have You Ever Been Discharged, Forced to Resign, or Been Laid Off Any Position?  Yes  No

If "Yes", explain: \_\_\_\_\_

**REFERENCES**

NAME	OCCUPATION	ADDRESS and TELEPHONE

**JOB APPLICANTS AGREEMENT and CERTIFICATION**  
***(Please Read Carefully To Ensure Your Understanding Before Signing)***

I certify that the information given by me in this application is true and complete in all respects. I understand and agree that any misleading or incorrect statements or the incomplete filling out of this application shall be considered sufficient cause for denial of employment or immediate discharge. I authorize Childress Winery, LLC. to investigate all information in this application and to secure additional information, if necessary. I understand that an investigative report may be made whereby information is obtained through personal interviews with third parties, such as business associates, state or local government, motor vehicle agencies, credit reporting agencies, agencies for background or criminal checks. I understand that this inquiry includes information as to my character, general reputation, personal characteristics, and mode of living, whichever is applicable. I have the right to make a written request within reasonable period of time for a complete and accurate disclosure of additional information concerning the nature and scope of the investigation. I authorize past employers, all references, and any other persons, unless stated otherwise in the application, to answer all questions asked related to my ability, character, reputation and previous employment record. In accordance with the law, I hereby release from all liability or responsibility all persons, companies or corporations furnishing such information. I understand that any consideration for, or offer of, employment is conditional on Childress Winery, LLC obtaining the results of this investigative report.

I understand that if I am employed by Childress Winery, LLC, I will be subject to the policies of Childress Winery, LLC and that Childress Winery, LLC may revise policies or procedures, in whole or in part, at any time.

I understand that the completion of this application does not assure me of a position with Childress Winery, LLC and does not obligate Childress Winery, LLC to me in any way. If an employment relationship is established, I understand that an initial Evaluation Period for new employees, regardless of other classifications, shall be in a trial status the first ninety (90) days of employment. During this period both the employee and employer shall consider whether each wishes to continue the association. A decision by the employee to discontinue employment may be made without prejudice anytime during that period providing a two-week written notice is given. A decision by Childress Winery, LLC to discontinue employment does not require a notice. I further understand that my employment shall be terminable at will, by either party, without notice, upon verbal or written notification of employment.

I understand that any offer of employment will be conditional on a post-offer successful completion of pre-employment substance abuse testing, background check and verification of my employability under U.S. immigration laws.

\_\_\_\_\_ DATE

SIGNATURE OF APPLICANT