



**APPLICATION FOR  
EMPLOYMENT**  
(AN EQUAL OPPORTUNITY EMPLOYER)

*We do not discriminate based upon race, color, religion, sex, national origin, citizenship, age, height, weight, marital status, veteran status, disability, familial status, or any other protected category. Individuals with disabilities may request accommodations in the application process.*

**Candidate Data**

Date: \_\_\_\_\_

Name: \_\_\_\_\_  
LAST FIRST MIDDLE

Address: \_\_\_\_\_  
Street City State Zip

Telephone No. (\_\_\_\_\_) \_\_\_\_\_ home / cell

Email Address: \_\_\_\_\_ Referred by? \_\_\_\_\_

Are you 18 years or older? Yes / No

Do you have the Covid Vaccinations? Yes / No

If hired, you will be asked for proof of vaccinations or to fill out an exemption form based on religious or medical reasons, before coming to work.

Are you currently authorized to work in the United States? Yes No

Do you have reliable transportation? Yes No

Have you been convicted of a crime? Yes No Provide details. When? \_\_\_\_\_ Where? \_\_\_\_\_

Do you have pending arrest charges? Yes No Provide details. When? \_\_\_\_\_ Where? \_\_\_\_\_

Details: \_\_\_\_\_

US Military Service \_\_\_\_\_ Rank Upon Discharge \_\_\_\_\_

Type of Discharge \_\_\_\_\_ Duties \_\_\_\_\_

\*NOTE: A conviction record will not necessarily be a bar to employment. Factors such as age, time of offense, seriousness and nature of violation and rehabilitation will be considered. Nor will a dishonorable discharge from the military necessarily be a bar to employment.

**Employment Desired**

Position Applied For: \_\_\_\_\_ Date you can start: \_\_\_\_\_

Salary Desired: \_\_\_\_\_

Ever applied to this Company before? Yes No

**Education**

High School Name	City, St	Years Attended	Graduate?
------------------	----------	----------------	-----------

College	City, St	Years Attended	Graduate?
---------	----------	----------------	-----------

Other	City, St	Years Attended	Graduate?
-------	----------	----------------	-----------

Special Certifications/Training: \_\_\_\_\_

**WORK HISTORY**

LIST CURRENT AND FORMER EMPLOYERS WITHIN THE PAST 5 YEARS (List most recent employer first)  
BE SURE YOU HAVE NOT OMITTED ANY EMPLOYER REGARDLESS OF DURATION AND NATURE (Request extra paper if necessary)

Dates of Employment (month/year): \_\_\_\_\_

Job Title: \_\_\_\_\_

Employer Name: \_\_\_\_\_ Supervisor Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Reason For Leaving: \_\_\_\_\_

Dates of Employment (month/year): \_\_\_\_\_

Job Title: \_\_\_\_\_

Employer Name: \_\_\_\_\_ Supervisor Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Reason For Leaving: \_\_\_\_\_

Dates of Employment (month/year): \_\_\_\_\_

Job Title: \_\_\_\_\_

Employer Name: \_\_\_\_\_ Supervisor Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Reason For Leaving: \_\_\_\_\_

Dates of Employment (month/year): \_\_\_\_\_

Job Title: \_\_\_\_\_

Employer Name: \_\_\_\_\_ Supervisor Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Reason For Leaving: \_\_\_\_\_

**REFERENCES**

LIST PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR

Name	Address	Phone	Relationship	Yrs Acquainted
------	---------	-------	--------------	----------------

Name	Address	Phone	Relationship	Yrs Acquainted
------	---------	-------	--------------	----------------

Name	Address	Phone	Relationship	Yrs Acquainted
------	---------	-------	--------------	----------------

**APPLICANT'S CERTIFICATION AND AGREEMENT - PLEASE READ BEFORE SIGNING**

I certify that all answers given by me are true, accurate and complete. I understand that falsification, misrepresentation, or omission of fact on this application (or any other Company or required documents) will be cause for denial of employment or immediate termination of employment, regardless of when or how discovered. Initial: \_\_\_\_\_

Questions regarding this Certification and Agreement should be directed to any employment interviewer before signing. The application will be given every consideration, but its receipt does not imply that the applicant will be employed.

I agree to immediately notify Midland Brewing Company if I am arrested for or convicted of a felony, or any crime involving dishonesty, breach of trust, controlled substances, abuse, or violence while my application is pending or, if hired, during my employment. Initial: \_\_\_\_\_

I understand that Michigan law requires employers to make reasonable accommodations to disabled employees where the accommodation does not impose an undue hardship on the employer. I further understand that in Michigan, disabled employees and applicants must request an accommodation for their disability by notifying Midland Brewing Company in writing, of the need for accommodation within one hundred eighty-two (182) days of the date the individual knows, or should know, that an accommodation is needed. Failure to properly notify Midland Brewing Company will preclude any claim that Midland Brewing Company failed to accommodate the disability. Initial: \_\_\_\_\_

I agree that any action or lawsuit against Midland Brewing Company and/or its predecessors, successors, assigns, subsidiaries, parent(s), affiliates, and all past and present officers, directors, employees and agents in their individual and representative capacities of the foregoing entities arising out of my application, employment or termination, including but not limited to claims arising under state or federal civil rights statutes, must be brought within one hundred eighty (180) days of the event giving rise to the claim(s) or within the limitations period contained in the statute I am suing under, whichever is shorter. I agree that any action or lawsuit filed outside this limitations period is barred forever. Further, I agree this provision does not prohibit me from filing a timely charge of discrimination, retaliation, or harassment with the Equal Employment Opportunity Commission (EEO) and the right to investigate is maintained. Except for claims requiring a "Notice of Right to Sue" from the EEOC prior to filing a formal lawsuit ("RTS Claims"), I agree that filing a charge or claim with an administrative agency, including the EEOC, or internally: (a) does not toll the 180-calendar day period for me to file a civil suit; and (b) if I wish to obtain individual relief, I understand that any lawsuit must be filed within 180 days (or applicable shorter period) of the complained of action. For RTS Claims, I must file suit prior to the first to occur of either: (a) 90 calendar days after the EEOC issues a "Notice of Right to Sue" letter for the claim; or (b) three hundred (300) calendar days after the complained of action. Initial: \_\_\_\_\_

I hereby agree and understand that if I am employed by Midland Brewing Company that I will carry out my duties and assignments in an ethical manner and avoid any conflicts of interest. I understand that in performing any services that I will not disclose any confidential Midland Brewing Company information to any competitors or contacts outside Midland Brewing Company and that any such actions will result in my immediate termination. I further agree and understand that I must sign an agreement consenting to assign the rights to any inventions, original work discoveries, ideas and improvements arising out of my employment with Midland Brewing Company and indicating my agreement not to disclose any confidential or proprietary information, not to compete or solicit customers or employees after my employment. Initial: \_\_\_\_\_

I authorize Midland Brewing Company or its representative to investigate my education, work and professional history and verify all data provided during the application process and throughout my employment. I agree to submit to a background check, including drug testing, if requested by Midland Brewing Company I release Midland Brewing Company from any liability that might arise from such investigation and/or testing. I request that previous employers contacted by Midland Brewing Company in connection with this application fully respond to all inquiries concerning such previous employment. I specifically waive prior written notice of disclosure of my personnel record information including salary information, disciplinary reports, and job performance, in consideration of the acceptance of my application, and release Midland Brewing Company its agents and my previous employers from any liability arising out of such response and disclosure. I understand that employment arising out of this application is contingent upon the results of this investigation and/or testing. Initial: \_\_\_\_\_

I agree that if I am hired, Midland Brewing Company may terminate my employment at will at any time for any reason or no reason at all. I understand that no representative of Midland Brewing Company has any authority to enter into any agreement for any specific period of time, or to make any agreement contrary to the foregoing. Any agreement altering the terminable at-will nature of the employment relationship must be in writing and signed by me and Midland Brewing Company's President. I further recognize that, if hired, my compensation and benefits are subject to change by Midland Brewing Company with or without notice. I acknowledge that my assigned work hours and place of work may be modified by Midland Brewing Company. Initial: \_\_\_\_\_

**I have read, understand, and agree to the above statements and conditions of employment.**

APPLICANT AND/OR EMPLOYEE SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Note to Applicant: Thank you for applying with Midland Brewing Company. If we have a suitable position for your experience, we will be contacting you soon.