

Application for Employment

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First Name:

Last Name:

Middle Initial:

Email Address:

Contact Number (Cell Preferred):

Street Address:

Street Address 2:

City, State

ZIP:

Country:

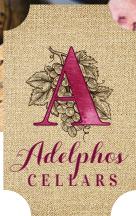
For which position are you applying?

Full-time Tasting
Room Associate

Part-time Tasting
Room Associate

If you selected Part-time, how many hours per week do you hope to work?

Please briefly describe all past work experience which is relevant to this position:



Please provide your thoughts on how to create a superior customer service experience for guests within the hospitality realm.

What is your current employment status?

- Employed Student
- Unemployed Other
- Self-employed

I understand that I must submit an updated and accurate resume in .doc, .docx, or .pdf format alongside this form in order for my application to be considered.

I understand that I must submit proof of my current and active TABC Server's certification alongside this form in order for my application to be considered.

I understand that I must submit proof of my current and active Food Handler's certification alongside this form in order for my application to be considered.

Is there anything additional you'd like to share with us in reference to your application?

I affirm that all information I have provided is true and accurate as declared.

Signature _____

Date _____