

MIGHTY MISSOURI

COFFEE CO.

EMPLOYMENT INFORMATION

GENERAL INFORMATION. PLEASE COMPLETE ALL REQUESTED INFORMATION.

EMAIL FINISHED COPY TO HELLO@MIGHTYMOFFEE.COM



Location/Store #		Today's Date	Position Desired						
Name (Last)	(First)	(Middle)	Minimum Salary Desired		Date Available For Work				
Email Address			I am interested in: <input type="checkbox"/> Full-time 30-40 hrs. per week <input type="checkbox"/> Part-time 0-29 hrs. per week <input type="checkbox"/> Seasonal Holiday/Summer						
Street Address			Are you at least 18 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No If you are under 18, you may be required to provide a work permit prior to working. Are you at least 16 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No						
City		State	Zip						
Telephone (Home)			Telephone (Cell)						
If you have worked for our company before state where, when, final position, and reason for leaving. Have you ever applied to our company before? If yes, where?			Please indicate the hours you are available to work during both day and evening (i.e., 2-4 p.m., 6-10 p.m.)						
			S	M	T	W	TH	F	S
			Note: Should your availability change, it is your responsibility to notify your supervisor						
			Do you have any relatives now employed by our company? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, identify by name(s), position and location:						

WORK EXPERIENCE. LIST YOUR PREVIOUS EXPERIENCE, BEGINNING WITH YOUR CURRENT OR MOST RECENT POSITION.

Employer			Starting Position			Starting Salary				
Street Address			City	State	Zip	Most Recent Position				
Most Recent Salary			Duties			Reason For Leaving				
Phone	Supervisor	Name/Title		Dates of Employment			Start: Month	Year	End: Month	Year
Employer			Starting Position			Starting Salary				
Street Address			City	State	Zip	Most Recent Position				
Most Recent Salary			Duties			Reason For Leaving				
Phone	Supervisor	Name/Title		Dates of Employment			Start: Month	Year	End: Month	Year
Employer			Starting Position			Starting Salary				
Street Address			City	State	Zip	Most Recent Position				
Most Recent Salary			Duties			Reason For Leaving				
Phone	Supervisor	Name/Title		Dates of Employment			Start: Month	Year	End: Month	Year

REFERENCES. INDIVIDUALS NOT RELATED TO YOU. BUSINESS REFERENCES PREFERRED.

Reference			Street Address			City	State
Phone	Email	Job Title		How Acquainted and For How Long			
Reference			Street Address			City	State
Phone	Email	Job Title		How Acquainted and For How Long			
Reference			Street Address			City	State
Phone	Email	Job Title		How Acquainted and For How Long			

EDUCATION & TRAINING: PLEASE INCLUDE NAME, STREET, CITY, STATE AND ZIP CODE FOR EACH SCHOOL

School	Address (include city & state)	Number of Years Completed	Degree	Type of Course/Major
College				
High School				
Additional Training				
Foreign languages?		Spoken Fluently?		
Computer/Software				
Other				

ADDITIONAL EMPLOYEMENT HISTORY INQUIRIES

<p>Have you ever been dismissed or forced to resign from any employment? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, please explain:</p>
<p>Have you been convicted of a felony crime or theft-related misdemeanor within the last 7 years that has not been expunged, sealed, impounded or annulled? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, state details: Convictions will not necessarily disqualify applicant; each case is considered individually .</p>

PERMISSION TO WORK

<p>Are you legally authorized to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Will you now or in the future require sponsorship for employment visa status (e.g., H1-B status)? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
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REFERRAL SOURCE

<p><input type="checkbox"/> Walk-in Applicant <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Employee Referral (Name) _____</p> <p><input type="checkbox"/> Community Organization (Name) _____ <input type="checkbox"/> School/College _____</p> <p><input type="checkbox"/> Website (Name) _____ <input type="checkbox"/> Other (Please List) _____</p>

ADDITIONAL QUESTIONS

<p>Why are you interested in working for our company?</p>
<p>What strengths would you bring to our company?</p>
<p>What didn't you like about your previous jobs ?</p>

APPLICANT'S STATEMENT

If I am employed, I agree to abide by the rules and regulations of the Company. I understand that my employment is at-will. This means that I do not have a contract of employment for any particular duration or limiting the grounds for my termination in any way. I am free to resign at any time. Similarly, Burleigh County Roasting Co., LLC is free to terminate my employment at any time for any reason. I understand that while personnel policies, programs and procedures may exist and be changed from time to time, the only time my at-will status could be changed is if I were to enter into an express written contract with BCRC, LLC explicitly promising me job security, containing the words "this is an express contract of employment" and signed by an officer of BCRC, LLC. The above language contains our entire agreement about my at-will status and supercedes any past, future, or oral side agreements.

All of the information I have supplied in this application is a true and complete statement of the facts, and if employed, any false statement or omission could result in immediate dismissal. I understand that BCRC, LLC may share the information contained in this application with other BCRC employees for employment and administrative purposes and hereby consent to such transfer. I authorize you to contact my references, as well as current and previous employers, to obtain information on my work history and qualifications for employment.

Signature

Date

This application will only be considered for three months. If you have not been hired within three months of filling out this application and you wish to continue to be considered for employment, you must fill out another application.