

## BlueWater Cowboy Saloon & Mercantile, LLC. Employment Application

Applicant should read all of the following information carefully before filling out any of the questions in this application and understand that any misrepresentation or omission of facts is cause for not being employed and/or termination of employment.

We appreciate your interest in joining our organization. BlueWater Cowboy Saloon and Mercantile, LLC., also known as BlueWater Cowboy, is an equal opportunity employer and will consider all applicants for all positions equally without regard to their race, sex, age, color, religion, national origin, veteran status or any disability as provided in the Americans with Disabilities Act.

All persons considered for employment and for continued employment will be subject to background checks and alcohol and drug screening tests at the expense of BlueWater Cowboy. The results and/or refusal of all tests, will determine a disciplinary course of action that may lead to not being employed and/or termination of employment.

BlueWater Cowboy is a family run business which values providing great food, a fun and friendly atmosphere and impeccable customer service. To be considered for employment, please answer each of the following in a complete and accurate manner, as no action can be taken regarding this application until all questions have been answered. Applications are accepted year round for all positions.

All positions require a dress code to present an appealing presentation to our guests and must be followed while employed by BlueWater Cowboy. All persons hired for employment will be required to work their schedule days based on a schedule given out by management. All persons hired for employment will be required to work most weekends and holidays, during peak season. The Full Time work week is typically 4-5 days and an average of 7 and 12 hours a day depending upon operating hours, position hired for and individual work schedules. Part Time schedules may vary hours and days.

# BlueWater Cowboy Saloon & Mercantile, LLC.

### PERSONAL INFORMATION

|                 |  |   | Dale_                           | <del></del>           |
|-----------------|--|---|---------------------------------|-----------------------|
| Name:           |  |   |                                 |                       |
|                 | Last   | First   |                                 | Middle                |
| Phone Numb      | oer:   |   |                                 |                       |
| Present Add     | ress:  |   |                                 |                       |
| No.             | Street   | City  | State                           | Zip                   |
| SSN             | <u>-</u>   |   |                                 |                       |
| How long ha     | ve you lived at the above                                | e address? years  | _months                         |                       |
| Are you a U.    | S. citizen or do you have                                | the legal right to be employed in the U   | .S.? Yes No                     |                       |
| If yes, state t |  | elony or subjected to a deferred adjudicate court, date, and disposition of the car |                                 |                       |
| Driver's Lice   | nse Number   | StateExpiration   |                                 |                       |
| Have you ev     | er had your driver's licen                               | se suspended or revoked? YES  | NO                              |                       |
| Do you have     | reliable transportation to                               | and from work every day? YES  | NO                              |                       |
| Position app    | lied for:  | Date you can start:   | Salary Desired:                 |                       |
|                 | Part Time T  | emporary Summer and/or Holid  | days Only                       |                       |
| ·               |  | NO If so, when:   |                                 |                       |
|                 |  | ers? YESNO  |                                 |                       |
| •               | , ,  | NO  |                                 |                       |
|                 |  | anization, give name?   |                                 |                       |
| ·               | ,  | pany before? YES NO _   |                                 |                       |
| ·               |  | Cowboy?   |                                 |                       |
|                 | ur abilities and interests on the position your applying | lo you feel would be most helpful to this for?                                      | s job or if you have any work s | kills you think would |
| Do you have     | any subject of special st                                | tudy or research work? If yes, explain:   |                                 |                       |

### **EMPLOYMENT HISTORY**

List your employers in consecutive order with the present or last employer listed first. Account for all periods of time including military service and any periods of unemployment.

| Date Month/ Year                 | Name & Address of Employer                        | Salary/ | Position |
|----------------------------------|---|---------|----------|
|                                  |   | Wages   |          |
| From                             |   |         |          |
|                                  |   |         |          |
| То                               |   |         |          |
| Duties Performed                 |   |         |          |
| From                             |   |         |          |
|                                  |   |         |          |
| То                               |   |         |          |
| Duties Performed                 |   | ı       |          |
| From                             |   |         |          |
| То                               |   |         |          |
| Duties Performed                 |   |         |          |
| From                             |   |         |          |
| 110111                           |   |         |          |
| То                               |   |         |          |
| Duties Performed                 |   |         |          |
| L Are you currently employed? Y  | <br>'ES NO  |         |          |
|                                  | r most recent employer? YES NO                    |         |          |
|                                  | umber:  |         |          |
| Have you ever lost time from w   | ork because of an accident? YES NO                |         |          |
| ·                                | d or asked to resign? YES NO                      |         |          |
| If yes, why?                     |   |         |          |
|                                  |   |         |          |
| What aspects of your last job of | lid you like best?                                |         |          |
|                                  |   |         |          |
| What aspects of your last job of | lid you like least?                               |         |          |
|                                  |   |         |          |
| If you could have made any av    | ggestions to management, what would it have been? |         |          |
|                                  | gyestions to management, what would it have been? |         |          |
|                                  |   |         |          |
| Why did you leave your last job  | o?  |         |          |

### **EDUCATION**

| _                                |   |                                |                             |
|----------------------------------|---|--------------------------------|-----------------------------|
|                                  | Date.   |                                |                             |
|                                  | Date:   |                                |                             |
| r company use on                 | ly:   |                                |                             |
|                                  |   |                                |                             |
| gn                               |   | Date                           | _                           |
| int Name                         |   |                                |                             |
| ave read over and                | completed this form in its entirety and agre  | e that all statements are true | and factual.                |
| gn and date applic<br>nployment) | ation in all designated areas. (Failure to do   | so may eliminate the applican  | t from consideration for    |
| ease review applic               | ation carefully for any mistakes and/or inco  | mpletion.                      |                             |
| ank you for your interview.      | nterest in joining our company. Once again,   | we will contact you if we are  | interested in setting up an |
| Military                         | stonest in initial and a surrenament of the state of the | we will eartest verifica-      | interested in a tiling      |
| Business/                        |   |                                |                             |
| Trade/                           |   |                                |                             |
| University                       |   |                                |                             |
| College/                         |   |                                |                             |
| High School                      |   |                                |                             |
| Elementary                       |   |                                |                             |
|                                  | oi ocitori  | Date                           | Degree                      |
|                                  | of School   | Date                           | Degree                      |
|                                  |   | Graduation                     | Type of Diploma/            |