



We consider applicants for all positions without regard to race, color, religion, gender identity, national origin, age, disability, veteran status or any other legally protected status.

Personal Information

Full Legal Name: _____ Preferred Name: _____

Address: _____ City/State/ZIP: _____

Phone Number: _____ Email Address: _____

Are you at least 16 years old? Yes / No Are you legally eligible for employment in the U.S.? Yes / No

Employment Information

Position Applying For: (Charcuterie Board Artist, Bartender, Assistant Manager, Cashier, other)

Job Title: _____ Date Available to Start: _____

Please refer to the attached job description for the position for which you are applying. Are you able to perform all tasks with or without reasonable accommodation? ____ Please describe which tasks, if any, you will need accommodation to perform, and explain what type of accommodation you will need: _____

Are you seeking full time, part time or temporary employment? _____

Desired Salary: _____ Do you have reliable transportation? Yes / No

Are you available to work overtime? _____ Nights? _____ Weekends? _____ Holidays? _____

Other notes on availability: _____

Work Experience:

1. Most Recent Employer

Company Name: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Dates of Employment: _____

Responsibilities: _____

Reason for Leaving: _____

2. Previous Employer

Company Name: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Dates of Employment: _____

Responsibilities: _____

Reason for Leaving: _____

3. Previous Employer

Company Name: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Dates of Employment: _____

Responsibilities: _____

Reason for Leaving: _____

Education:

Highest Level of Education: _____ School/University: _____

Graduation Year: _____ Degree Earned: _____

Skills & Certifications

Please list any relevant to the position(s) you are applying for:

References:

1. Name: _____ Relationship: _____

Phone: _____ Email: _____

2. Name: _____ Relationship: _____

Phone: _____ Email: _____

Why would you like to work at Board In Birmingham?

Authorizations & At-Will Employment Agreement**(please read carefully, then sign and date below)**

I certify that I have personally completed this application. I declare that the information provided in this employment application is true and complete and I understand that any false information or significant omissions may disqualify me from further consideration for employment and may be justification for my dismissal from employment if discovered at a later date. I agree to immediately notify this company if I should be convicted of a crime while my job application is pending or during my employment, if hired.

I authorize this company to make an investigation of all information contained in this employment application and I release from liability all companies and corporations supplying such information. I understand any false answers, statements, or implications made by me on this application or other required documents shall be considered sufficient cause for denial of employment or discharge.

I specifically authorize and direct my current and former employers to supply employment-related information to this company and do hereby release my current and former employers from liability for providing information to this company.

Upon termination of my employment for whatever reason, I release this company from all liability for supplying any information concerning my employment to any potential employer.

I authorize this company, if applicable, to request a copy of my credit report, motor vehicle driving record, and any other investigative report deemed necessary through various third party sources. As required by law, upon request within a reasonable period of time, I will be notified as to the nature and scope of such investigations.

I hereby agree to submit to any drug test required of me, whether prior to my employment or if employed by this company at any time thereafter. If requested, I will take a post-job offer physical examination and my employment, in the event I receive medical treatment for any condition, including a physical, psychological, emotional, or psychiatric condition that is job-related, I hereby authorize the limited release and exchange of such medical information relating to my condition between the treatment provider and a company-designated physician.

AT-WILL EMPLOYMENT AGREEMENT

I understand and agree that nothing contained in this application, or conveyed during any interview is intended to create an employment contract between the company and me. In addition, I understand and agree that if you employ me, in consideration of my employment, my employment and compensation will be at-will, for no definite period of time, and may be terminated at any time, for any reason, or for no reason at all. I understand that only the company's President is authorized to change the employment-at-will status and such a change can only be done in writing. I have read, understand, and agree to the above.

Name: _____

Signature: _____ Date: _____