

Employment Application



Deer Creek Winery is an Equal Opportunity Employer. We offer employment opportunities to all qualified applicants without regard to race, religion, creed, color, sex, national origin, age, disability, or any other legally protected status. If you need assistance with this form or any phase of the application process, please notify us so that we can reasonably accommodate your needs.

Today's Date: _____

NAME: (LAST) _____ (FIRST) _____ (MIDDLE) _____

CURRENT ADDRESS: (STREET) _____ (CITY) _____ (STATE) _____ (ZIP) _____ PHONE NUMBER: _____

EMAIL ADDRESS: _____ CELL NUMBER: _____

POSITION APPLIED FOR: _____ REFERRED BY: _____

ARE YOU CURRENTLY EMPLOYED? YES NO

DATE YOU CAN START: _____ Have you ever been terminated from a job? YES NO

Have you ever been arrested or charged with a crime or misdemeanor? IF YES, WHEN & WHY? _____

EDUCATION:

HIGHEST LEVEL COMPLETED: _____

POST-SECONDARY EDUCATION: _____ GRADUATED? YES NO

WHERE ATTENDED: _____ FIELD OF STUDY _____

OTHER CERTIFICATES/DEGREES EARNED: _____

WORK EXPERIENCE:

LIST BELOW LAST FOUR CONSECUTIVE EMPLOYERS INCLUDING MILITARY, STARTING WITH THE MOST RECENT

DATE MONTH & YEAR	NAME & ADDRESS OF EMPLOYER	SALARY START/FINAL	POSITION HELD/DUTIES	REASON FOR LEAVING	MAY WE CONTACT? Phone#
FROM: TO:					YES NO
FROM: TO:					YES NO
FROM: TO:					YES NO
FROM: TO:					YES NO

Rate yourself on computer comprehension and use: **1 2 3 4 5** (with 5 being the best)

Days/times you are available: M _____ T _____ W _____ TH _____ F _____ S _____ S _____

Do you know anyone who currently or previously worked for Deer Creek Winery & Who _____

References: Please list the names and contact information for three (3) professional references. List only current or previous supervisors and different than above:

NAME	ADDRESS	CONTACT NUMBER	TIME KNOWN

Additional Information, Skills, or Comments:

MILITARY SERVICE:

HAVE YOU SERVED IN THE ARMED FORCES? YES NO

BRANCH/COUNTRY: _____

FROM: _____ TO: _____

AUTHORIZATION:

I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL. I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES AND EMPLOYERS LISTED ABOVE TO PROVIDE ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION, PERSONAL OR OTHERWISE, AND RELEASE THE COMPANY FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM UTILIZATION OF SUCH INFORMATION.

THIS WAIVER DOES NOT PERMIT THE RELEASE OR USE OF DISABILITY-RELATED OR MEDICAL INFORMATION IN A MANNER PROHIBITED BY THE AMERICANS WITH DISABILITIES ACT (ADA) AND OTHER RELEVANT FEDERAL AND STATE LAWS.

TODAY'S DATE: ____/____/____

SIGNATURE: _____ PRINT NAME: _____

THANK YOU FOR YOUR INTEREST IN Deer Creek Winery

**Please complete all areas of this application.
You may mail or email your completed form to:**

**Deer Creek Winery
HR Director
3333 Soap Fat Rd
Shippenville, PA 16254
Email: Nikki@deercreekwine.com
NO PHONE CALLS PLEASE**