

**JOIN OUR TEAM**

To apply for a position at **Iowa Taproom or Ken's - a not so secret speakeasy**, please fill out the application below and apply in-person at our restaurant or email it to [general@iowataproom.com](mailto:general@iowataproom.com). Thank you for your interest, we look forward to hearing from you!

**Date of application:** \_\_\_\_\_

**PERSONAL INFORMATION**

Name \_\_\_\_\_ Email \_\_\_\_\_  
 FIRST \_\_\_\_\_ LAST \_\_\_\_\_

Address \_\_\_\_\_  
 STREET ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_  
 Phone \_\_\_\_\_

When is the best time to reach you?  MORNING  AFTERNOON  EVENING      Are you legally eligible to work in the US?  YES  NO

Are you 18 years or older?  YES  NO      Have you ever been convicted of a felony?  YES  NO      If yes, please explain. \_\_\_\_\_

**AVAILABILITY**

Position Desired: *(check all that apply)*

SERVER  HOST  LINE COOK  BUSER  ASST. MANAGER  BARTENDER  EXPEDITER  PREP COOK  DISHWASHER  FOOD RUNNER

Please list the hours you are available to work each week:

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
From:							
To:							

Any scheduling restrictions we should be aware of? \_\_\_\_\_

How many Shifts or Hours do you want per week? Shifts: \_\_\_\_\_ Hours: \_\_\_\_\_

**PREVIOUS EMPLOYMENT**

Have you ever worked for a Full Court Press restaurant before?  YES  NO      If yes, which location? \_\_\_\_\_

Dates of Employment: \_\_\_\_\_ Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

List below your last three employers starting with most recent.

Employer 1

COMPANY NAME	/	/	\$	\$
	FROM	TO	STARTING PAY	ENDING PAY
CITY	STATE		PHONE	
JOB TITLE	REASON FOR LEAVING			

**Employer 2**

COMPANY NAME	FROM /	TO /	\$ STARTING PAY	\$ ENDING PAY
CITY	SUPERVISOR		PHONE	
JOB TITLE	REASON FOR LEAVING			

**Employer 3**

COMPANY NAME	FROM /	TO /	\$ STARTING PAY	\$ ENDING PAY
CITY	SUPERVISOR		PHONE	
JOB TITLE	REASON FOR LEAVING			

**EDUCATION**

**High School**

SCHOOL NAME	CITY	STATE
NUMBER OF YEARS ATTENDED	Graduated? <input type="checkbox"/> YES <input type="checkbox"/> NO	

**College/Other Education**

SCHOOL NAME	CITY	STATE
NUMBER OF YEARS ATTENDED	Graduated? <input type="checkbox"/> YES <input type="checkbox"/> NO	

EXTRACURRICULARS

TITLE OF DEGREE OR CERTIFICATION OR AREA OF STUDY

**REFERENCES**

REFERENCE NAME	RELATIONSHIP	PHONE #	YEARS KNOWN
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**ACKNOWLEDGEMENT**

By signing my name below, 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 termination.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise and release the company from all liability for any damage that may result from utilization of such information.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_