

Bayou Belles Spirit, LLC

Application for Employment

**PLEASE PRINT ALL
INFORMATION REQUESTED
EXCEPT SIGNATURE**

*Bayou Belles Spirit, LLC is an Equal Opportunity Employer. Applicants are considered for employment on the basis of qualifications without regard to race, color, national origin, religion, age, sex, or handicapping condition. As provided by federal law, applicants are invited to request accommodation in order to complete the application or applicant procedures or to take any required employment test.

DATE of Application _____

Name _____
(Last, First, Middle, Maiden)

Present address

(Number Street City State Zip)

How long _____

Social Security No. _____ - _____ - _____

Telephone () _____

If under 18, please list age _____

Position applied for (1) _____
and salary desired (2) _____
(Be specific)

Days/hours available to work

No Pref _____ Thur _____

Mon _____ Fri _____

Tue _____ Sat _____

Wed _____ Sun _____

How many hours can you work weekly? _____ Can you work nights?

Employment desired ___ FULL-TIME ONLY ___ PART-TIME ONLY ___ FULL- OR PART-TIME ___ SUB
ONLY

When are you available to begin work? _____

Education

Name of School/Location	Number of Years Completed	Major/Degree
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HAVE YOU EVER BEEN CONVICTED OF A CRIME? __ No __ Yes

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation.

DO YOU HAVE A DRIVER'S LICENSE? __ Yes __ No

What is your means of transportation to work?

Driver's license number _____ State of issue _____

Expiration date _____

Please list two references other than relatives or previous employers.

Name _____

Position _____

Company _____

Address _____

Telephone () _____

Name _____

Position _____

Company _____

Address _____

Telephone _____

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

MILITARY

HAVE YOU EVER BEEN IN THE ARMED FORCES? Yes No

ARE YOU NOW A MEMBER OF THE NATIONAL GUARD? Yes No

Specialty _____ Date Entered _____ Discharge Date _____

Work Experience

Please list your work experience for the past five years beginning with your most recent job held.

If you were self-employed, give firm name. Attach additional sheets if necessary.

Name of employer _____

Address _____

Name of last supervisor _____

Employment dates _____

Phone number _____

Your last job title _____

Reason for leaving (be specific) _____

List the jobs you held, duties performed, skills used or learned, advancements, or promotions while you worked at this company. _____

Name of employer _____

Address _____

Name of last supervisor _____

Employment dates _____

Phone number _____

Your Last Job Title _____

Reason for leaving (be specific) _____

List the jobs you held, duties performed, skills used or learned, advancements, or promotions while you worked at this company. _____

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Address _____

Name of last supervisor _____

Employment dates _____

Phone number _____

Your last job title _____

Reason for leaving (be specific) _____

List the jobs you held, duties performed, skills used or learned, advancements, or promotions while you worked at this company. _____

May we contact your present employer? Yes No

Did you complete this application yourself Yes No

If not, who did? _____

I certify that the information in this application is true and complete. I also certify that I can perform the duties and responsibilities inherent in this position with or without reasonable accommodations. I understand that furnishing false information or omitting information on this application could disqualify me from consideration for employment or could lead to discharge from employment. You are hereby authorized to make any investigations of my personal and employment history.

Signature of Applicant: _____

Date: _____

Bayou Belles Spirit, LLC

Sexual Misconduct Disclosure Statement

I hereby affirm that I have never committed any act or acts that resulted in an investigation by a previous employer or law enforcement agency relating to or involving sexual misconduct, neglect or abuse of a minor child or a student, or sexual misconduct involving a co-workers or others. I authorize all present employers, or any prior employer, to disclose to the Bayou Belles Spirit, LLC or its agents or employees, any and all information relative to all instances of alleged sexual misconduct, abuse, or neglect committed by me, if any. I expressly give consent for the release of this information, including, without limitation, from any school employee or teacher personnel file maintained with respect to me. I release, discharge and agree to hold harmless any current or prior employer, and any employee acting on behalf of such employer or prior employer, from any liability for providing any information relative to any and all instances of alleged sexual misconduct committed by me, if any.

I have read and understand the statement above.

I also understand that I cannot be considered for employment at Bayou Belles Spirit, LLC unless this form is signed.

Once this form has been signed, the applicant may be hired on a conditional basis pending the review of any information obtained.

I agree that a background check will be done before employment to Bayou Belles Spirit, LLC.

Signature of Applicant: _____

Social Security Number: _____

Date: _____