

Troutman Vineyards

Application for Employment

Date	Position	
Applicant Information		
Name:		
Address:		
Daytime Phone:	Evening Phone:	
E-mail		

Specify days and Hours you are available for work:

Days	Hours (Please include A.M	1. or P.M.)	
Monday	/M	to	/M
Tuesday	/M	to	/M
Wednesday	/M	to	/M
Thursday	/M	to	/M
Friday	/M	to	/M
Saturday	/M	to	/M
Sunday	/M	to	/M
-			

When can you start?_____

We are an Equal Opportunity Employer (EOE)

As an equal opportunity employer, Troutman Vineyards does not discriminate in hiring or terms and conditions of employment, because of an individual's race, creed, color, sex, age, religion, disability or national origin. Troutman Vineyards only hires individuals authorized to work in the United States.

Education			
	High School	College	Other
Name and Location		_	
Course of Study			
Years Completed			
Date of Completion			
Type of degree			

Please tell us about any special skills, experiences or certifications which are relevant to the position you are seeking.

Business or Professional References (Please list individuals other than family members or friends who can help us assess your qualifications and ability to do this job.)

Name:	Phone Number:	
Job Title and Company:		
Address:		
Relationship to you:		
Name:		
Job Title and Company:		
Address:		
Relationship to you:		
	Phone Number:	
Job Title and Company:		
Address:		
Relationship to you:		
Employment		
List all current and prior employment during the last 5 year Account for any time during this period in which you were		
Account for any line during this period in which you were	unemployed. I lease and additional pages if necessary.	
May We Contact Your Present Employer	Yes No	
ing the second		
Company Name:	Telephone:	
Address:	-	
	Title:	
Employed From: to		
State Job Title and Description of Work:		
5 1		
Were you disciplined during your employme	ent? (Counseled, suspended, discharged, etc.)	
Yes No		
If you had disciplinary problems with previo	ous employer, please describe	
fully:		
Number of days absent in the last year of en	nployment:	
Number of days tardy in the last year of emp	oloyment:	
Reason for leaving:		
Company Name:	Telephone:	
Address:		
Name of Supervisor:	Title:	
Employed From: to		
State Job Title and Description of Work:		
Were you disciplined during your employme	ent? (Counseled, suspended, discharged, etc.)	
Yes No	1 1 1 1	
If you had disciplinary problems with previo		
fully:		
Number of days absent in the last year of en	1 1	
Number of days tardy in the last year of emp		
Reason for leaving:		

Applicant Certification

Please read carefully before signing.

This application will remain on file for six (6) months. If you have not been employed within six (6) months of your application, you must re-apply.

By my signature below, I voluntarily agree to the following:

- ♦ I understand that if I am employed by Troutman Vineyards, employment is "at will", which means that employment is not for a definite period and may be terminated by either myself or Troutman Vineyards, in the sole discretion of either, for any reason, at any time. I understand that no one at Troutman Vineyards has authority to make any different agreement except the President by formal agreement in writing signed by the President and the employee. I understand that if employed by Troutman Vineyards, that satisfactory completion of my provisional period will not change my status as an at will employee.
- I certify that the information contained in this application for employment is true, correct and complete and I hereby grant Troutman Vineyards permission to verify the information provided. I understand that the giving of false information or the failure to give complete information requested herein shall constitute grounds, among others, for rejection of my application or immediate termination in the event that I am hired.
- I understand that none of Troutman Vineyard's practices or policies are to be construed as imposing any binding obligations on the Company, and that they are subject to change or deletion at any time.
- I hereby authorize Troutman Vineyards to obtain from schools, former employers, or other individuals or institutions it contacts, any information in their possession regarding my employment history or qualifications for the job for which I have applied.
- I understand that if employed by Troutman Vineyards, I will be required within three business days of my date of hire to complete an I-9 Form and provide Troutman Vineyards with a document or documents that establish my identity and eligibility to work in the United States.

I promise that I have read and understand this Applicant Certification:

Authorized Signature of Applicant_____ Date_____