

PLEASE PRINT ALL
INFORMATION REQUESTED
EXCEPT SIGNATURE

CROSSOVER FINE WINES & SPIRITS APPLICATION FOR EMPLOYMENT

DO YOU HAVE A DRIVER'S LICENSE? Yes No

What is your means of transportation to work? _____

Driver's license number _____ State of issue _____ Operator Commercial (CDL) Chauffeur
Expiration date _____ Do you have full coverage insurance? _____

Have you had any accidents during the past three years? How many? _____

Have you had any moving violations during the past three years? How Many? _____

OFFICE
POSITIONS ONLY

Typing Yes No _____ WPM 10-key Yes No Word Processing Yes No _____ WPM

Personal Computer Yes No PC Mac Other Skills _____

Please list two references other than relatives.

Name _____	Name _____
Position _____	Position _____
Company _____	Company _____
Address _____	Address _____
_____	_____
Telephone () _____	Telephone () _____

Please use this space to elaborate on any background, experience, or qualifications that you believe should be considered in evaluating your qualifications for employment. You may include hobbies, volunteer experience and any other activities you believe relevant. Please omit any information that would disclose your race, gender, age, marital status, ethnic origin, religious or political affiliations, or disability.

Empty space for elaboration on background, experience, or qualifications.

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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 seven 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 City, State, Zip Code Phone number	Name of last supervisor	Employment dates From To	Pay or salary Start Final
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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May we contact your present employer? Yes No

Did you complete this application yourself Yes No If not, who did? _____

PLEASE READ CAREFULLY

APPLICATION FORM WAIVER

As indication that you have read and understood each sentence, please write your initials in the spaces provided below.

In exchange for the consideration of my job application by Crossover , (hereinafter called "the Company"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment,____ or to confer any right to remain an employee Crossover, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned,____ and that relationship cannot be altered except by a written instrument signed by the Owner/Managing Member of the Company.____ Both the undersigned and Crossover may end the employment relationship at any time, without specified notice or reason.____ If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.____

I authorize investigation of all statements contained in this application.____ I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice.____ I hereby give the Company permission to contact schools, all previous employers (unless otherwise indicated), references and others and hereby release the Company from any liability as a result of such contact.____

I understand that, in connection with the routine processing of your employment application, the Company may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics and mode of living.____ Upon written request from me, the Company, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.____

I further understand that my employment with the Company shall be probationary for a period of ninety (90) days and further that at any time during the probationary period or thereafter, my employment relationship with the Company is terminable at will for any reason by either party.____

Signature of applicant _____ Date: _____

Crossover Fine Wines and Spirits is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, gender, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with Crossover Fine Wines and Spirits depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.

Crossover Liquor Drug-Free Workplace Statement of Policy

Policy

- **All employees are strictly prohibited from possessing, using, distributing, selling, or working under the influence of illegal drugs or controlled substances; or possessing, using, or being under the influence of alcohol on company property, or while conducting company business.**
- Employees are required as a condition of employment to submit to drug and alcohol testing. Such testing will be performed in accordance to this policy. Any person who tests positive for drugs or alcohol, or who otherwise is found in violation of this policy, will be subject to discipline, up to and including discharge.

Reasons For Policy

- Crossover Liquor is committed to maintaining a work environment that is safe and productive for the employees and other people doing business with the company. Safety is extremely important to the company, and Crossover Liquor works hard to protect the employees, company assets, and the public alike.
- Crossover Liquor wants to emphasize that it is not the company intention to catch an individual doing something wrong. Rather, the intention is to discourage the use of and possession of these substances in order to protect the life and health of all employees, as well as the Customers and public with whom Crossover Liquor comes in contact. It is only those who abuse this policy who need to be concerned. In implementing this policy, Crossover Liquor is sensitive to legitimate privacy concerns.

Printed name _____

Signature _____

Date _____

Crossover Dress Code

- Crossover expects employees to dress appropriately.
- Employees must maintain a neat, clean, business-like appearance.
- Personal hygiene should never be forgotten or overlooked. Cleanliness about the face, hands, arms and fingernails is required at all times.
- A well-groomed employee immediately makes a good impression both for the company and the employee.
- Crossover recognizes and acknowledges that subjectivity is involved in the area of employees' appearance. Therefore, the employee's Supervisor will provide further clarification as needed or requested.
- Employees must wear Crossover issued shirts and look professional at all times.
- They may not wear clothes such as going to the river clothes, clothing that is ripped or tattered or ragged sneakers.
- Crossover issued shirts must be clean and presentable, (pressed) tucked in and two-buttons buttoned at all times.
- Failure to follow Crossover's dress code is grounds for disciplinary action up to and including termination.
- Employees are responsible for upkeep and washing of shirts.
- The only exception to wearing a Crossover shirt is on Razorback game days. Employees can wear Razorback tee-shirts on gameday. (preferably RED!!)
- No burnt orange, longhorn or st. louis cardinal attire is allowed! This is grounds for termination!
- Each employee will be issued shirts and will return all shirts upon termination of employment. Any shirt not returned, employee will be assessed the full price of the shirt.

I have read and understand this policy.

Signature _____

Date _____