

Red Cedar Coffee Co.

Application for Employment

1185 W Bagley Road, Berea, OH 44017

(T) 440.260.7509 RedCedarCoffee.com jobs@redcedarcoffee.com

Dear Applicant:

Welcome to Red Cedar Coffee Co.! Prior to completing the application for employment, please understand that we are serious about creating a productive working environment for our staff and maintaining the highest levels of quality, service, and attention for our customers.

We want you to understand that we also believe in living our values, some of which are:

- We believe in honesty and integrity.
- We are committed to each other's success.
- We believe a collaborative work environment allows each member's strength to elevate the overall team.
- We believe that only a happy and professional staff can give the level of professional service we demand.
- We believe in the ongoing training and development of our staff and see it as a worthy investment in the future of the company.
- We believe that everyone is capable of being an A+ player.
- We like to have fun.

Working at Red Cedar Coffee Co. means making a commitment to learning about coffee and great service; to help create an exceptional workplace.

We look forward to getting to know you during the interview process.

Company Description:

Red Cedar Coffee Co. is a family-owned specialty coffee roaster located in Berea, Ohio. Within our coffee roasting facility, we operate a small retail store with a walk-up coffee bar and drive thru serving drinks to go.

Red Cedar Coffee Co. – Application for Employment We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, disability, veteran status or any other legally protected status.

PLEASE PRINT CLEARLY							
Date:							
Position(s) applied	for:	Production	🗆 Retail	job title			
How did you find o	out about this job?	🗆 Employee 🗆 Wa	alk-in 🗆 Social Med	dia 🗆 Other			
Why are you seeking	ng a new job at this t	ime?					
Applicant Info	rmation						
First Name		Middle		_Last			
Street Address							
City/State/Zip Phone							
If the job you are a	pplying for requires	driving: Driver's License No.		_State Expirat	ion		
Are you legally eligible for employment in the US?							
Are you at least 18 years old? Yes No							
Employment In							
Are you seeking full-time, part-time, or temporary employment?							
If part-time, or temporary/seasonal, what is your availability? please list hours of availability below.							
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday		
If applying for our	retail sales positions	, are you available to	work on Saturdays	P 🗆 Yes 🗆 No			
Are you currently employed? Yes No If hired, when would you be able to start?							
Have you ever worked for this organization before? Yes No							
List any friends or relatives employed by this company:							
Have you ever been discharged or asked to resign from any position? Yes No							
If yes, please describe:							

Are you able to perform all tasks with or without reaso	nable accommodation?						
Please describe which tasks, if any, you will need accommodation to perform, and explain what type of							
accommodation you will need:							
Education (circle highest level achieved)							
Secondary: 9 10 11 12 GED							
Name of school:	Location of school:						
College: 1 2 3 4 5							
Name of school:	Location of school:						
Degree & Major:							
Work History (please begin with most recent job)							
Company	_ Phone Number ()						
Address	_City/State/Zip						
Dates of Employment	Salary: Beginning Ending						
Job Title	_Supervisor's Name & Title						
Describe duties briefly:							
Specific reason for leaving:							
Company	Phone Number ()						
Address	_ City/State/Zip						
Dates of Employment	Salary: Beginning Ending						
Job Title	Supervisor's Name & Title						
Describe duties briefly:							
Specific reason for leaving:							
	_ Phone Number ()						
	City/State/Zip						
	Salary: BeginningEnding						
Job Title	Supervisor's Name & Title						
Describe duties briefly:							
Specific reason for leaving:							
For reference purposes: Have you worked for any of the	ese organizations or attended school under a different name?						
If yes, give name and organization(s)							
iviay we contact the employers listed above? If no	ot, list the employers you do not wish us to contact and why:						

Briefly explain what you enjoy about coffee					

Authorization & At-Will Employment Agreement

(please read carefully, then sign and date below)

I certify that I have personally completed this application. I declare that the information provided in this employment application is true and complete and I understand that any false information or significant omissions may disqualify me from further consideration for employment and may be justification form my dismissal from employment if discovered at a later date. I agree to immediately notify this company if I should be convicted of a crime while my job application is pending or during my employment, if hired.

I authorize this company to make an investigation of all information contained in this employment application and I release from liability all companies and corporations supplying such information. I understand any false answers, statements, or implications made by me on this application or other required documents shall be considered sufficient cause for denial of employment or discharge.

I specifically authorize and direct my current and former employers to supply employment-related information to this company and do hereby release my current and former employers from liability for providing information to this company.

Upon termination of my employment for whatever reason, I release this company from all liability for supplying any information concerning my employment to any potential employer.

I authorize this company, if applicable, to request a copy of my credit report, motor vehicle driving record, and any other investigative report deemed necessary through various third-party sources. As required by law, upon request within a reasonable period of time, I will be notified as to the nature and scope of such investigations.

I hereby agree to submit to any drug test required of me, whether prior to my employment or if employed by this company at any time thereafter. If requested, I will take a post-job offer physical examination and my employment, in the event I receive medical treatment for any condition, including a physical, psychological, emotional, or psychiatric condition that is job-related, I hereby authorize the limited release and exchange of such medical information relating to my condition between the treatment provider and a company-designated physician.

AT-WILL EMPLOYMENT AGREEMENT

I understand and agree that nothing contained in this application or conveyed during any interview is intended to create an employment contract between the company and me. In addition, I understand and agree that if you employ me, in consideration of my employment, my employment and compensation will be at-will, for no definite period of time, and may be terminated at any time, for any reason, or for no reason at all. I understand that only the company's President is authorized to change the employment-at will status and such a change can only be done in writing. I have read, understand, and agree to the above

Signature

Date _____

Name (please print) _____