Statement of Values

Dear Applicant:

Welcome to Mountain High Pie. 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 guests.

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

- We believe that good enough isn't.
- We believe in doing business in a professional and orderly manner.
- We believe in honesty and integrity.
- We believe that only a happy and professional staff can give the level of personal 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 in providing legendary service the unique and powerful sort of personal care and attention that our guests tell stories about.
- We believe that everyone is capable of being an A+ player.

If this feels like an environment for you, please complete the application.

Instructions:

- 1) Complete application
- 2) Include references & up to date phone numbers
- 3) Email to: Lorrie@MountainHighPie.com

or

Drop off at: Mountain High Pie

202 Main Street

Collbran, CO 81624

Questions? Call 970-775-9059 between 2pm & 4pm & ask for Monica or Lorrie. Thank you!



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 **

Position(s) applied for			Date	/ /
How did you find out about this job?	☐ Newspaper ☐ Employee	☐ Walk-in ☐ Relative	Other	
Why are you seeking a new job at the	is time?			
Applicant Informat	ion			
First Name	Middle	L	ast	
Street Address	So	cial Security No.		
City/State/Zip		Phone ()	
If hired, do you have a reliable mean	s of transportation to get to work	? Description	ribe	
Are you at least 18 years old?	If you are under 18 years of	age, can you furnish a wor	k permit?	
If the job you are applying for requir Are you legally eligible for employm Have you been convicted of a crime? (I clude marijuana-related convictions that offense and disposition of the case. Inclu	ment in the U.S.? (Production of the Massachusetts applicants should not occurred more than 2 years prior to	of of U.S. citizenship or im t include misdemeanor convic the application date.)	nmigration stactions; Califor	atus is required if hired.) rnia applicants should not in If yes, state the nature of the
Are you a veteran? List any special skills or training: Employment Inform				
Are you seeking full time, part time of				
What hours and shift(s) would you p				
List times you are not available to we				
Are you willing to work overtime? _	Weekends?	Holidays?		
Are you currently employed?	If hired, when would you	be able to start?		
Have you ever worked for this organ				
List any friends or relatives employe	d by this company:			
Have you ever been discharged or as	ked to resign from any position?	If yes, please	describe:	
If applicable, please refer to the attactasks with or without reasonable acceperform, and explain what type of ac	ommodation? Please desc	cribe which tasks, if any, yo	ou will need	accommodation to
Please describe:				

Education (circle highest level achieved) College: 1 2 3 4 5 6 7 8 1 2 3 4 5 6 7 8 Secondary: 9 10 11 12 G.E.D Elementary: Name of School: ______ Name of School: _____ Name of School: Location of School: Location of School: Location of School: If in high school, are you enrolled in a recognized co-op program? \square Yes \square No Degree & Major: If yes, identify program and school: Minor: Work History (please begin with most recent) Phone No. with Area Code () 1. Company ___ City/State/Zip Address Dates of Employment: From _____ To ____ Salary: Beginning ____ Ending ____ Supervisor's Name & Title _____ Job Title Describe duties briefly: Specific reason for leaving: Phone No. with Area Code (_____)___ 2. Company ___ _____ City/State/Zip _____ Dates of Employment: From _____ To ____ Salary: Beginning ____ Ending ____ Supervisor's Name & Title Job Title ___ Describe duties briefly: Specific reason for leaving: 3. Company _____ Phone No. with Area Code (_____) Address City/State/Zip Dates of Employment: From _____ To ____ Salary: Beginning ____ Ending ____ Job Title ______Supervisor's Name & Title _____ Describe duties briefly: Specific reason for leaving: 4. Company Phone No. with Area Code () Address _____ City/State/Zip _____ Dates of Employment: From _____ To ____ Salary: Beginning ____ Ending ____ Supervisor's Name & Title Describe duties briefly: Specific reason for leaving: **For references purposes:** Have you worked for any of these organizations or attended school under a different name? If yes, give name and organization(s) May we contact the employers listed above?____ If not, list the employers you do not wish us to contact and why:

Authorizations & 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)		