



QBW, LLC is an equal opportunity employer dedicated to a policy of non-discrimination in employment on any basis including race, creed, color, age, sex, religion, national origin, disability, or any other prohibited basis of discrimination as provided under applicable state and federal law. All employees of TCBY are "at will" employees subject to termination at any time, for any reason, or for no reason. QBW, LLC provides reasonable accommodations for the known disabilities of applicants, unless to do so would pose undue hardship to the company. Please feel free to let us know if you need an accommodation to complete the application process.

Personal Information

Last Name _____ First Name _____ Middle Name/Initial _____
() _____ () _____
Cell Phone _____ Home Phone _____ Email Address _____
Home Address _____ City/State _____ Zip Code _____
Are you at least 18 years of age? ☐ Yes ☐ No

Employment Desired

Position Desired: ☐ Part Time ☐ Full Time ☐ Seasonal ☐ Temporary
When are you available to start? _____
Have you ever worked for TCBY? ☐ Yes ☐ No If "Yes", when were you employed? _____
Where was the TCBY located? _____ Reason for leaving? _____
Are you legally able to be employed in the U.S.? ☐ Yes ☐ No Are you currently employed? ☐ Yes ☐ No
What is your salary/wage requirement? _____ Total hours desired each week? _____
Please indicate the days and hours you are available to work each week. (A.M./P.M.)

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From							
To							

Education History

High School _____	Telephone(_____) _____
Address _____	City/State _____ Zip _____
Graduated? ☐ Yes ☐ No	Currently Enrolled? ☐ Yes ☐ No Last Grade Completed: _____ GPA: _____
College _____	Telephone(_____) _____
Address _____	City/State _____ Zip _____
Graduated? ☐ Yes ☐ No	Currently Enrolled? ☐ Yes ☐ No Major: _____ GPA: _____

Employment History

Company _____ Address _____

City/State _____ Zip _____ Telephone(____) _____

Position _____ Supervisor _____ Dates Worked _____ - _____

Wage _____ Reason For Leaving _____

Job Duties _____

FOR OFFICE USE ONLY
 Checked by: _____ Date: _____

Company _____ Address _____

City/State _____ Zip _____ Telephone(____) _____

Position _____ Supervisor _____ Dates Worked _____ - _____

Wage _____ Reason For Leaving _____

Job Duties _____

FOR OFFICE USE ONLY
 Checked by: _____ Date: _____

Company _____ Address _____

City/State _____ Zip _____ Telephone(____) _____

Position _____ Supervisor _____ Dates Worked _____ - _____

Wage _____ Reason For Leaving _____

Job Duties _____

FOR OFFICE USE ONLY
 Checked by: _____ Date: _____

Do we have permission to contact your current employer? ☐ Yes ☐ No If "No", please explain _____

Miscellaneous

Have you ever been convicted of a crime? Yes ☐ No ☐ If "Yes", please explain _____
Conviction will not necessarily disqualify an applicant. The recency, severity, and pertinence of the conviction to the job will all be considered.

Can you perform, with or without reasonable accommodations, the essential functions of the position for which you have applied?
☐ Yes ☐ No If "No", please explain _____

How did you hear about the position you are applying for? _____

References

List the names of three people who are not related to you, who you have known for at least one year.

Name	Address	Phone	Yrs. Known

Applicant Certification and Agreement

In consideration of being employed by QBW, LLC, I understand and agree that:

1. *This application is not a contract of employment.*
2. Any doctor, hospital, or testing laboratory has my consent to conduct medical or drug tests on me, and I hereby give my consent to release all information for the employer to determine my abilities to perform job duties now or in the future.
3. The needs of the employer may require overtime to be scheduled. I accept these conditions of employment.
4. QBW, LLC is an equal opportunity employer. The employer does not discriminate in employment, and no question on the employment application is used for the purpose of limiting or excluding any applicant's consideration for employment on any basis prohibited by local, state, or federal law.
5. If employed, I may terminate my employment at any time without notice or cause, and the employer may terminate or modify the employment relationship at any time without prior notice or cause. In consideration of my employment, I agree to conform to the rules and regulations of the employer, and I understand that no department head or representative of QBW, LLC, other than the owners, has any authority to enter into any agreement, oral or written, for employment for any specified period of time, or to make any agreement or assurances contrary to this policy.
6. If employed, I understand and agree that my employment is for no definite period of time, and may, regardless of the date of payment of wages and salary, be terminated at any time without any previous notice. If terminated, the employer is liable only for wages or salary earned as of the date of termination.
7. This application is current and active for only thirty (30) days. At the conclusion of this time, if I have not had any contact from the employer and still wish to be considered for employment, it will be necessary for me to reapply.

I have read, and agree to the above and hereby certify that the facts I have provided in my employment application are true and complete. If I misrepresent or deliberately leave out a fact in my application, I may be refused employment, or if employed I may be terminated.

Signature

Date

AUTHORIZATION TO CONDUCT BACKGROUND INVESTIGATION

Full Name: _____
Last First Middle Initial

Maiden or Previous Name Used: _____

Present Address: _____
City State Zip

For identification purposes only:

Date of Birth: _____

Social Security Number: _____

DL Number: _____ State: _____

In connection with my application for, or employment with (including contract services) QBW, LLC I, _____ authorize the company and its respective agents to solicit information about my background including, but not limited to, information about my employment, education, consumer credit history, driving record, criminal record, and general public records history.

I also authorize the procurement of an investigative consumer report. I understand that such as investigative consumer report may contain information about my background, my mode of living, character, and personal reputation; and that I am entitled to be advised of the nature and scope of the investigation requested within a reasonable period of time after I ask for this information in writing.

I release the company, its respective employees and agents and all persons, and entities providing information or reports about me from any and all liabilities arising out of the release of any such information reports.

In using a consumer report for employment purposes, before taking any adverse action based in whole or in part on the report, the company shall provide to the consumer to whom the report relates, a copy of the report and a description in writing of the rights of the consumer under this title, as prescribed by the Federal Trade Commission section 609c(3). I also understand that any employment offer (or promotion) is contingent on the results of the background investigation.

Signature

Date