

APPLICATION FOR EMPLOYMENT

Premium eJuice USA, LLC is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Should an applicant need reasonable accommodation in the application process, he or she should contact a company representative.

DEDSONAL	INFORMATION						
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FULL NAME: Bryce Maxwell					JOB ID	J2050	
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6600 Outer Loop		93					
CITY:		STATE:	ZIP:				
Louisville		Kentucky	40228				
Louisviiis		Romaony	-10220				
PHONE NUMBER:		EMAIL ADDRESS:					
502-299-1845		bryce.maxwell72600@gm	bryce.maxwell72600@gmail.com				
			Are You 18 Years of Age or			ᄧ	
	Have You	Ever Applied to or worked for Premiun	n eJuice USA or Vapor Lab: No		APPLICANT NAME	BRYCE MAXWELL	
Do You Have Any Friends, Relatives, or Acquaintances working for Premium eJuice USA or Vapor Lab:						3	
Have You Ever Been Convicted Of A Felony: №						S	
If Selected For Employment Are You Willing To Submit to a Pre-Employment Drug Screening And/Or Background Check: Yes							
Are You A U.S. Citizen or Approved To Work in the Unted States:							
		Do You Have Reliable Transpo				F	
How Did You He	AT POSITION SALES ar About This Position: Just wanted a r You Available To Work: Monday, Tuesd You Available To Work: I Can Work Any	ew job ay, Wednesday, Thursday, Friday, Saturday					
	Hours I Can Work:				DATE	11/27/20	
References:	Туре	Name Phone Number				/2	
ittererenees.	Personal	camarius gregory				18	
	Personal	DJ				ω	
	Personal	Jaycee Quik					
Previous Emplo Previous Employer Name Enterprise Reason For Leaving	Dyment: Job Title Laborer	Supervisor Name Mike Hardin	LIST BELOW LAS Phone Number +1 502-807-2473	T THREE EMPLOYERS, STARTING WITH LAST Dates of Employment 2018-11-01 Currently Employed Here Can We Contact For A Reference: Yos	ONE	FIRST	
Previous Employer Name	Job Title	Supervisor Name	Phone Number	Dates of Employment			
Reason For Leaving				Can We Contact For A Reference:			
Previous Employer Name	Job Title	Supervisor Name	Phone Number	Dates of Employment			
Reason For Leaving				Can We Contact For A Reference:			