



# EMPLOYEE APPLICATION

48 W. Chicago Avenue | Naperville, Illinois | 60540

Empire Burgers + Brew is an equal opportunity employer. We do not discriminate on the basis of race, color, religion, national origin, gender, age, marital status, sexual orientation or disability. All qualified applicants will be given equal opportunity and selection decisions will be based upon job related factors.

## PERSONAL INFORMATION / INFORMACION PERSONAL

Last Name / First Name / Middle Name \_\_\_\_\_

Address / City / State / Zipcode \_\_\_\_\_

Home Phone / Cell \_\_\_\_\_

Social Security # \_\_\_\_\_

## EMPLOYMENT DESIRED

Position Applying for \_\_\_\_\_

Date Available to Start \_\_\_\_\_

Salary / Hourly Requirement \_\_\_\_\_

Can you work Overtime? Yes / No      Can you work Days? Yes / No      Can you work Nights? Yes / No

Can you work Weekends? Yes / No      Can you work Holidays? Yes / No

## GENERAL INFORMATION / INFORMACION GENERAL

How did you hear of Empire? \_\_\_\_\_

Are you at least 18 years of age? Yes / No      Are you legally eligible to work in the U.S.? Yes / No

Have you ever gone by another name? Yes / No

If so please specify other name \_\_\_\_\_

List any relatives currently or formerly employed by Empire \_\_\_\_\_

Have you ever been convicted of any law violation? Yes / No

If so please explain in detail \_\_\_\_\_

Have you ever been discharged or asked to resign for any reason? Yes / No

If so please explain \_\_\_\_\_

**EDUCATION**

Name of School \_\_\_\_\_

Location \_\_\_\_\_ Did you graduate? Yes / No

Name of School \_\_\_\_\_

Location \_\_\_\_\_ Did you graduate? Yes / No

Major \_\_\_\_\_

Any Additional Schooling or Training? \_\_\_\_\_

**EMPLOYMENT HISTORY Begin with current or last employer**

Employer 1 / Compania \_\_\_\_\_

Position \_\_\_\_\_ Dates Employed \_\_\_\_\_

Address / Phone # \_\_\_\_\_

Supervisor Name / Phone # \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Employer 2 / Compania \_\_\_\_\_

Position \_\_\_\_\_ Dates Employed \_\_\_\_\_

Address / Phone # \_\_\_\_\_

Supervisor Name / Phone # \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Employer 3 / Compania \_\_\_\_\_

Position \_\_\_\_\_ Dates Employed \_\_\_\_\_

Address / Phone # \_\_\_\_\_

Supervisor Name / Phone # \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

**PLEASE READ THE FOLLOWING STATEMENT BEFORE SIGNING**

I certify that all information in this employment application is true and complete to the best of my knowledge. Any omission or false information may disqualify me from further consideration for employment and may result in immediate dismissal if discovered at a later date.

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_ Date \_\_\_\_\_