## **Employment Application**

Please complete the form below to apply for a position with Burke's Pub or 1912.

• NOTICE: Applicant should read the following information very carefully before filling out any of the questions on this form. We are an equal opportunity employer and fully subscribe to the principles of equal opportunity; all qualified applicants will receive equal consideration. It is our policy to seek and employ the best qualified personnel without regard to race, creed, color, national origin, religion, age, sex, disability, or any other basis protected by either state or federal law. Information on this application will not be used for any purpose prohibited by law.

Questions indicated with * are	required for application	ı submission.			
Location Applying For: *	_	ole St. Omaha, NE 6810 17 Maple St. Omaha, N			
Position Applying For: *					
Bartender	Server	Bar back		Security	
Kitchen Staff					
Management					
Other					
Personal Informati	ion				
Full Name *					
	First Name	Middle Name	Last Name		
Social Security Number *					
Are you over the age of 21? *					
O Yes	No, Indicate date of below*.	of birth			
*If not over 21; Date of Birth					

Addre	ss *	Street Ad	ddress				
		Stroot A	ddress Line 2				
		Street Ac	adress Line 2				
		City		State /	Province		
					ted States	▼	
		Postal /	Zip Code	Count	ry		
Home	Phone Number		-				
		Area Coo	de Phone Nu	mber			
Cell Pl	none Number *			1			
		Area Coo	de Phone Nu	moer			
E-mail	*	ex: m	nyname@exa	mple.com			
			,				
If hired	, what date could	d you start? *					
06	02	2015	*				
Month	Day	Year					
Please	indicate the hour	s and days you a	are available.				
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From:	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From:	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
To:					Friday	Saturday	Sunday
To:	Monday  kimately how ma				Friday	Saturday	Sunday
To:					Friday	Saturday	Sunday
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Are you  Are you  Ye  Have y  Ye  If yes, 1	cimately how manual legally authorizes	ny hours per we zed to work in the No	eek would you lil the U.S.? *  The will not automa	tically exclude yo			Sunday

015		Empl	oyment Applicat	tion
If yes, please explain.				<u>/</u>
Do you have adequate transpor	rtation to be at work,	on time, when so	cheduled to wo	ork? *
Yes	O No			
Do you have a valid Drivers Li	icense? *			
Yes	O No			
• Burke's Pub and 1912 pay vi	a direct deposit. Do y	you have a check	ing account?	*
Yes	O No			
Education				
High School: *				
City & State *				
Did you Graduate? *	O Yes	$\circ$	No	
If yes, what year?				
GED:	O Yes	0	No	○ N/A
Did you attend any college? *	Yes	0	No	
If yes, School Name:				
City & State:				
Years Attended:				
Course of Major Study:				
Did you Graduate?	O Yes	0	No	
Employment Record		with present or l	ast listed first	

Employed from: *		
To: *		
Address *	Street Address	
	Street Address Line 2	
		Province  ed States ▼
	Postal / Zip Code Country	
Phone Number	Area Code Phone Number	
If still employed, may we contact this employer? *	○ Yes ○ No	
Supervisor: *		
Your Position and Duties: *		
Starting pay; indicate by hour, week, month or other *		
Ending pay; indicate by hour, week, month or other *		
Reason for leaving: *		
Prior employer (2)		
Employed from:		
То:		
Address & Phone #:		

**Employment Application** 

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Supervisor:	
Your Position and Duties:	
Starting pay; indicate by hour, week, month or other	
week, monut of outer	
Ending pay; indicate by hour,	
week, month or other	
Reason for leaving:	
Prior employer (3)	
Tior employer (5)	
Employed from:	
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Го:	
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Address & Phone #:	
Your Position and Duties:	
Supervisor:	
Starting pay; indicate by hour, week, month or other	
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Ending pay, indicate by hour,	
week, month or other	
Reason for leaving:	

## **Additional Information**

Please indicate the kind of work you have done: \*

6/2/2015	Employment Application
Bartender	Bar Back Wait Staff/Server
Bus Tables	Food Prep Chef
Kitchen Help	Dishwasher Host/Hostess
Door Security	None of the Above
Your Remarks or Special	
Qualifications, Additional Training or Experience that would apply to this Position.	
Are there duties you would be	e unable to perform? *
O No	Yes, Please specify below*:
*Please explain	
Upload Resume if available	Choose File No file chosen
References	
References Please do not use family mem	bers.
Please do not use family mem	ebers.
Please do not use family mem	Pirst Name  Last Name
Please do not use family mem  1) Full Name *	
Please do not use family mem	
Please do not use family mem  1) Full Name *	First Name Last Name
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Please do not use family mem  1) Full Name *  Phone Number *  Relationship? *	First Name Last Name
Please do not use family mem  1) Full Name *  Phone Number *	First Name Last Name  Area Code Phone Number
Please do not use family mem  1) Full Name *  Phone Number *  Relationship? *	First Name Last Name
Please do not use family mem  1) Full Name *  Phone Number *  Relationship? *  2) Full Name *	First Name Last Name  Area Code Phone Number  First Name Last Name
Please do not use family mem  1) Full Name *  Phone Number *  Relationship? *	First Name Last Name  Area Code Phone Number
Please do not use family mem  1) Full Name *  Phone Number *  Relationship? *  2) Full Name *	First Name  Last Name  Area Code  Phone Number  First Name  Last Name  Last Name
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Please do not use family mem  1) Full Name *  Phone Number *  2) Full Name *  Phone Number *	First Name  Last Name  Area Code  Phone Number  First Name  Last Name  Last Name
Please do not use family mem  1) Full Name *  Phone Number *  2) Full Name *  Phone Number *	First Name  Last Name  Area Code  Phone Number  First Name  Last Name  Last Name
Please do not use family mem  1) Full Name *  Phone Number *  2) Full Name *  Phone Number *  Relationship? *	First Name  Last Name  Area Code  Phone Number  First Name  Last Name  Last Name
Please do not use family mem  1) Full Name *  Phone Number *  Relationship? *  Phone Number *  Relationship? *	First Name  Last Name  Area Code  Phone Number  First Name  Last Name  Area Code  Phone Number

Relationship? \*

## By submission, I hereby state that all the information provided on this application is true and correct and that my signature will be required at the time of an interview.

I authorize Burke's Pub and/or 1912 to investigate my responses on this application and contact any or all of my former employers (except as noted) or any individuals familiar with me or my employment background for the purpose of verifying any information I have provided.

Check this box to certify that you have read and accept the above statement. \*

Yes

Enter the message as it's shown

