



Application for Employment

Crew Bar + Grill is looking for a **HARD WORKING** staff who enjoy the challenge of working with the public, and are capable of a **TEAM EFFORT** when it comes to getting the job done.

Some things in life cannot be taught. Before you complete this application, ask yourself.

Are you **HONEST**?

Do people describe you as **FRIENDLY**?

Are you **RESPONSIBLE**?

If you answered yes to these questions, then get busy completing this application.

We want to talk with you!

Crew Bar + Grill

4804 N. Broadway
Chicago, IL 60640

www.worldsgreatestbar.com

By e-mail: info@worldsgreatestbar.com

APPLICATION FOR EMPLOYMENT

LAST NAME	FIRST	MIDDLE	DATE OF APPLICATION		
PRESENT ADDRESS		CITY	STATE	COUNTY	ZIP CODE
HOME PHONE NUMBER ()	CELL PHONE NUMBER ()		SOCIAL SECURITY NUMBER		
EMAIL ADDRESS			PREFERRED PHONE NUMBER (CIRCLE) CELL HOME		
HOW WERE YOU REFERRED? CHECK ALL THAT APPLY.					
WEBSITE _____ <small>PLEASE SPECIFY</small>		NEWSPAPER/MAGAZINE _____ <small>PLEASE SPECIFY</small>			
WALK-IN	CREW EMPLOYEE _____ <small>PLEASE SPECIFY</small>		OTHER _____ <small>PLEASE SPECIFY</small>		

PERSONAL INFORMATION

POSITION APPLIED FOR		DATE AVAILABLE FOR WORK
ARE YOU 21 YEARS OF AGE OR OLDER? YES NO	HAVE YOU EVER WORKED UNDER ANOTHER NAME? IF SO, PLEASE LIST	ARE YOU APPLYING FOR: FULL TIME PART TIME TEMPORARY ALL OF THE ABOVE
ARE YOU ABLE, WITH OR WITHOUT REASONABLE ACCOMMODATION, TO PERFORM THE ESSENTIAL FUNCTIONS OF THE JOB POSITION FOR WHICH YOU ARE APPLYING? YES NO		
HAVE YOU EVER BEEN OR ARE YOU CURRENTLY EMPLOYED BY A RESTAURANT/BAR? IF YES, PLEASE LIST THE BUSINESS NAME, POSITION AND DATES WORKED.		
ARE YOU A U.S. CITIZEN OR OTHERWISE LEGALLY AUTHORIZED TO WORK IN THE U.S.? YES NO (If employment is offered and accepted, you will be required to submit verification of your legal right to work in the United States.)	Do you understand employment may require working weekends, holidays, overtime, and rotation shifts as required by business needs? Yes No	
HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE? YES NO IF YES, EXPLAIN. _____ _____ _____		

EDUCATION / SKILLS

SCHOOL	NAME & LOCATION OF SCHOOL	COURSE OF STUDY	CIRCLE LAST YEAR COMPLETED				DID YOU GRADUATE?	LIST DIPLOMA OR DEGREE
HIGH SCHOOL			1	2	3	4		
COLLEGE			1	2	3	4		
GRADUATE SCHOOL			1	2	3	4		
OTHER EDUCATION OR SPECIAL TRAINING:								

PAST EMPLOYMENT

LIST ALL PREVIOUS EMPLOYMENT BEGINNING WITH THE MOST RECENT. ATTACH SEPARATE FORM IF NECESSARY

FROM (DATE) _____ TO _____ START SALARY _____ LAST SALARY _____

JOB TITLE: _____

EMPLOYER NAME AND ADDRESS: _____

IMMEDIATE SUPERVISOR: _____ TITLE _____ PHONE _____

DUTIES: _____

REASON FOR LEAVING: _____

FROM (DATE) _____ TO _____ START SALARY _____ LAST SALARY _____

JOB TITLE _____

EMPLOYER NAME AND ADDRESS: _____

IMMEDIATE SUPERVISOR: _____ TITLE _____ PHONE _____

DUTIES: _____

REASON FOR LEAVING: _____

FROM (DATE) _____ TO _____ START SALARY _____ LAST SALARY _____

JOB TITLE _____

EMPLOYER NAME AND ADDRESS: _____

IMMEDIATE SUPERVISOR: _____ TITLE _____ PHONE _____

DUTIES: _____

REASON FOR LEAVING: _____

List any employers you do not want contacted and why: _____

Please explain any gaps in employment: _____

