



EMPLOYMENT APPLICATION

Please print clearly. This application is not a contract of employment.

Each Sunrise Social location is independently owned and operated. The franchisee is the employer for this location and makes all hiring decisions. Do not provide a Social Security number or date of birth on this application.

Location: _____ Franchisee legal entity: _____

POSITION & AVAILABILITY

Position applying for: _____ Date available: _____ Referred by: _____

Employment type: ☐ Full-time ☐ Part-time ☐ Seasonal / temporary

APPLICANT INFORMATION

Full legal name: _____

Phone: _____ Email: _____

Mailing address: _____

City: _____ State: _____ ZIP: _____

☐ I am legally authorized to work in the United States.

☐ I can perform the essential functions of the position, with or without reasonable accommodation.

WEEKLY AVAILABILITY

Day	Morning	Afternoon	Evening	Unavailable
Mon	☐	☐	☐	☐
Tue	☐	☐	☐	☐
Wed	☐	☐	☐	☐
Thu	☐	☐	☐	☐
Fri	☐	☐	☐	☐
Sat	☐	☐	☐	☐
Sun	☐	☐	☐	☐

EMPLOYMENT HISTORY - MOST RECENT FIRST

Employer 1

Employer: _____ City / State: _____

Job title: _____ Dates (from - to): _____ Supervisor: _____

Supervisor phone: _____ Reason for leaving: _____

Duties: _____

May we contact? ☐ Yes ☐ No ☐ Later

Employer 2

Employer: _____ City / State: _____

Job title: _____ Dates (from - to): _____ Supervisor: _____

Supervisor phone: _____ Reason for leaving: _____

Duties: _____

May we contact? ☐ Yes ☐ No ☐ Later



EMPLOYMENT APPLICATION - CONTINUED

EDUCATION, TRAINING & CERTIFICATIONS

School / program: _____ Course or credential: _____

Completed (yes / no): _____ Year: _____ Other training: _____

Certifications: ☐ Food handler ☐ ServSafe ☐ Alcohol service ☐ Other

SKILLS & EXPERIENCE

- | | | |
|--|-----------------------------------|--|
| ☐ Grill | ☐ Saute | ☐ Prep |
| ☐ Pantry / salads | ☐ Dish | ☐ Cash handling |
| ☐ POS system | ☐ Hosting | ☐ Serving |
| ☐ Coffee / drinks | ☐ Catering | ☐ Opening / closing |

Languages spoken (optional): _____

PROFESSIONAL REFERENCES

Reference 1

Name: _____ Relationship: _____

Company: _____ Phone: _____

Reference 2

Name: _____ Relationship: _____

Company: _____ Phone: _____

ADDITIONAL INFORMATION

Use this space for anything else relevant to the position - experience, accomplishments or schedule notes.

ACKNOWLEDGMENT & SIGNATURE

I certify that the information in this application is true and complete to the best of my knowledge. I understand that false or misleading information may result in disqualification or, if hired, separation. I understand this application is not a contract, and that employment with the independently owned and operated franchisee is at will where applicable, meaning either I or the employer may end the employment relationship at any time, subject to applicable law.

Signature: _____ Date: _____

Printed name: _____