



EMPLOYMENT APPLICATION

Cinema Entertainment is an EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER. Prospective employees will receive consideration without discrimination because of race, creed, color, sex, religion, age, marital status, disability, national origin, sexual orientation, or veteran status.

PERSONAL INFORMATION

Date of Application ___/___/___

Name (Last)	(First)	(Middle)				

Home Address	City	State	Zip			

Home Telephone	Cell Phone					
() _____	() _____					
Position Applying For:	<input type="checkbox"/> Cashier	<input type="checkbox"/> Doorperson	<input type="checkbox"/> Concession	<input type="checkbox"/> Janitorial	<input type="checkbox"/> Manager	
Are you interested in (check all that apply):	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time	<input type="checkbox"/> Temporary	<input type="checkbox"/> Summer Only		
Date You are Available to Start Work: _____	Are you at least 16 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you at least 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Please Check Any Days and Shifts that you would be able to work. (Check all that apply):						
<u>MON</u>	<u>TUES</u>	<u>WED</u>	<u>THURS</u>	<u>FRI</u>	<u>SAT</u>	<u>SUN</u>
<input type="checkbox"/> Day	<input type="checkbox"/> Day	<input type="checkbox"/> Day	<input type="checkbox"/> Day	<input type="checkbox"/> Day	<input type="checkbox"/> Day	<input type="checkbox"/> Day
<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening

EDUCATION

Type of School	Name & Location of School	Number of Yrs. Attended	Graduated ? (Check One)	Degree / Area of Study
High School			<input type="checkbox"/> Yes <input type="checkbox"/> No	
College			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Graduate School			<input type="checkbox"/> Yes <input type="checkbox"/> No	

SPECIAL SKILLS

Please indicate if you have experience or abilities with any of the following equipment: (Check all that apply):

Cash Registers Computers Concession Equipment Projection Equipment Other (list) _____

LEGAL

Can you, after being hired, verify your legal right to work in the U.S.? Yes No

(Identity and employment eligibility of all new hires will be verified as required by the Immigration Reform and Control Act of 1986)

EMPLOYMENT HISTORY

List employment starting with your most RECENT position. May we contact your PRESENT employer? Yes No your PAST employer(s)? Yes No

PREVIOUS EMPLOYMENT DATES	NAME , ADDRESS & PHONE # OF PREVIOUS EMPLOYERS	POSITION	REASON FOR LEAVING
From: _____(mo) / _____(yr) To: _____(mo) / _____(yr)			
From: _____(mo) / _____(yr) To: _____(mo) / _____(yr)			
From: _____(mo) / _____(yr) To: _____(mo) / _____(yr)			

Have you previously worked for a Cinema Entertainment Theatre? Yes No If yes, please provide the following information:

LOCATION: (City) _____ (State) _____ POSITION HELD: _____
 SUPERVISOR: _____ DATES EMPLOYED: From _____ to _____
 REASON FOR LEAVING _____

REFERENCES

List Personal References Only. Do NOT List former employers or relatives.

NAME	OCCUPATION	ADDRESS	PHONE #	YEARS KNOWN

PLEASE READ CAREFULLY

In submitting this application for employment, I understand that an investigation may be made whereby information is obtained regarding my character, previous employment, general reputation, and educational background. Criminal history may be asked upon hiring. I authorize anyone possessing this information to furnish it to Cinema Entertainment and/or a 3rd party company upon request. I release Cinema Entertainment Corporation, and any 3rd party company from all liability and damages whatsoever in furnishing, obtaining, or using said information.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in immediate dismissal. I also understand that I am required to abide by all rules and regulations of Cinema Entertainment Corporation.

I acknowledge that, if hired, my employment with Cinema Entertainment is "at will". I can be terminated with or without cause, and with or without notice, at any time, at the option of either Cinema Entertainment or myself.

Applicant's Signature _____ Date Signed _____