

Employment Application

Applicant Information											
Full Name:		<i>Last</i>			<i>First</i>			<i>M.I.</i>	Date:		
Address:		<i>Street Address</i>					<i>Apt #</i>				
		<i>City</i>					<i>State</i>		<i>ZIP Code</i>		
Phone:		()			E-Mail Address:						
Date Available:		Social Security No.:			Desired Salary:		\$				
Position Applied for:		Operations <input type="checkbox"/>		Box Office <input type="checkbox"/>		Food & Beverage <input type="checkbox"/>		Usher <input type="checkbox"/>		Parking <input type="checkbox"/>	Security <input type="checkbox"/>
Are you a citizen of the United States?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?			YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Do you have the appropriate documentation to legally work in the United States?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	Are you over the age of 18?			YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Have you ever worked for this company?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, when?						
Have you ever been convicted of a felony?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	Are you related to anyone working at this location? If so who?						
Are you under the age of 16?			YES <input type="checkbox"/>	NO <input type="checkbox"/>							
How did you hear that we were hiring?											
Education											
High School:					Address:						
From:		To:		Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree:			
College:					Address:						
From:		To:		Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree:			
Other:					Address:						
From:		To:		Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree:			
References											
<i>Please list three professional references.</i>											
Full Name:					Relationship:						
Company:							Phone:		()		
Address:											
Full Name:					Relationship:						
Company:							Phone:		()		
Address:											

References Continued:									
Full Name:					Relationship:				
Company:					Phone:		()		
Address:									
Previous Employment									
Company:					Phone:		()		
Address:					Supervisor:				
Job Title:				Starting Salary: \$		Ending Salary: \$			
Responsibilities:									
From:		To:		Reason for Leaving:					
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>				
Company:					Phone:		()		
Address:					Supervisor:				
Job Title:				Starting Salary: \$		Ending Salary: \$			
Responsibilities:									
From:		To:		Reason for Leaving:					
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>				
Company:					Phone:		()		
Address:					Supervisor:				
Job Title:				Starting Salary: \$		Ending Salary: \$			
Responsibilities:									
From:		To:		Reason for Leaving:					
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>				
Company:					Phone:		()		
Address:					Supervisor:				
Job Title:				Starting Salary: \$		Ending Salary: \$			
Responsibilities:									
From:		To:		Reason for Leaving:					
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>				
Military Service									
Branch:					From:			To:	
Rank at Discharge:					Type of Discharge:				
If other than honorable, explain:									

Disclaimer and Signature

I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED; FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL. I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU. I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYMENT IS CONSIDERED TO BE "AT WILL" EMPLOYMENT AND IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF MY WAGES AND SALARY; BE TERMINATED AT ANY TIME WITHOUT PRIOR NOTICE."

Signature:

Date: