

VIOLET CROWN

EMPLOYMENT APPLICATION

Name _____
Address _____

Phone Number _____
Email _____
Today's Date _____

We are an equal opportunity employer dedicated to a policy of nondiscrimination in employment on any basis, including race, color, age, sex, religion, disability, or national origin. You must be 18 years or older to apply.

EMPLOYMENT DESIRED

Type of employment: Part-time Summer Full-time Temporary

Position _____
Date you can start _____
Salary desired _____

EDUCATION

College _____	High School _____
Location _____	Location _____
Years completed 1 2 3 4+	Years completed 1 2 3 4+
Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No
Major _____	
Degree Attained _____	Other Education _____



EMPLOYMENT HISTORY

Are you currently employed?

Yes No

If so, may we contact your current employer?

Yes No

1	EMPLOYER		EMPLOYED FROM	TO
			/ /	/ /
	SUPERVISOR NAME	ADDRESS		PHONE NUMBER
SUPERVISOR POSITION		CITY	STATE	ZIP CODE
YOUR POSITION		YOUR DUTIES		STARTING SALARY
REASON FOR LEAVING				ENDING SALARY

2	EMPLOYER		EMPLOYED FROM	TO
			/ /	/ /
	SUPERVISOR NAME	ADDRESS		PHONE NUMBER
SUPERVISOR POSITION		CITY	STATE	ZIP CODE
YOUR POSITION		YOUR DUTIES		STARTING SALARY
REASON FOR LEAVING				ENDING SALARY

3	EMPLOYER		EMPLOYED FROM	TO
			/ /	/ /
	SUPERVISOR NAME	ADDRESS		PHONE NUMBER
SUPERVISOR POSITION		CITY	STATE	ZIP CODE
YOUR POSITION		YOUR DUTIES		STARTING SALARY
REASON FOR LEAVING				ENDING SALARY

4	EMPLOYER		EMPLOYED TO	TO
			/ /	/ /
	SUPERVISOR NAME	ADDRESS		PHONE NUMBER
SUPERVISOR POSITION		CITY	STATE	ZIP CODE
YOUR POSITION		YOUR DUTIES		STARTING SALARY
REASON FOR LEAVING				ENDING SALARY



BUSINESS REFERENCES -----

Please list 3 references. People you have worked with are preferred. Do not include friends, relatives, or employers.

1.	NAME	OCCUPATION	WORK RELATIONSHIP	PHONE NUMBER
2.				
3.				

MOVIE KNOWLEDGE -----

List the last 4 movies you saw and what you thought of them.

1.	MOVIE	COMMENTS
2.		
3.		
4.		

GENERAL -----

Do you have a current TABC Certificate? Yes No

Do you have a current Food Handler's Certificate? Yes No

Have you or any of your family members ever been employed by Violet Crown Cinemas, Sky Cinemas or WSB Mgmt?
Yes No

If yes, what company and when: _____

State any additional information you may feel helpful to us in considering your application:

I certify that the information provided is true and correct. I understand that I must present appropriate identification before beginning work and that I must be available to work evenings, weekends, and holidays.

APPLICANT'S SIGNATURE

