| Programs, services and employment are equally available to everyone. Please inform the Management if you require reasonable accommodation for the application or interview. | | | Date Available to Start (Month/Day/Year | | | |
|---|-----------------------|-------------------|---|--------------|--|--|
| Applicant Data | | | Position Applied for: | / | | |
| How were you referred to us: | | | | | | |
| were you referred to us. | | | | | | |
| Full Name: | | | | | | |
| | | | | | | |
| Address: | City: | | State: | Zip: | | |
| | | | | | | |
| Phone: | Other Phone: | | E-mail: | | | |
| | | | | | | |
| Social Security Number: | Salary Requirements: | | Are You At Least 16 Yea | rs of Age: | | |
| If you are under 18 years of age, can you provide | a work permit? | o please explain: | | | | |
| ii you are under 10 years or age, can you provide | a work permit: | о рісазе ехріаін. | | | | |
| | | | | | | |
| | | | | | | |
| Have you ever worked for KJB Theaters? | | If yes, when? | | | | |
| | | | | | | |
| Are you legally allowed to work in the United Stat | es? | Type of employr | ment desired: | | | |
| | | | | | | |
| Have you ever pleaded guilty, no contest or been | convicted of a crime? | | If yes, give dates | and details: | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Can you work holidays, weekends and nights?

Please fill out your availability below

| uesday Wednesday Thursday |
|---------------------------|
| |
| |
| |
| |

| Education History | | | | | | | | | |
|---|--|---|--|---|---|-------------|--|---|-----------|
| Name & Location of High School: | | | | | | Did | you graduat | e? | |
| Name & Location of College: | | | | | Years attended: | | | | |
| Degrees completed: | | | | Other Subjects | Studied: | | | | |
| Trade, Business or Correspondence School | ol: | | | | | Year | s attended: | | |
| Subjects Studied: | | | | | | Did | you graduat | e? | |
| Summarize Your Specail Skills | s or Qualificat | tions | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Previous Employment (begin | with most re | cent p | oistion) | | | | | | |
| Dates of Employment | From: | / | / | | | To: | / | / | |
| Company Name: | | | | Position Held: | | | | | |
| City: | State: | : | | | Zip: | | | | |
| Phone: | Super | visor: | | | Title: | | | | |
| Responsibilities: | | | | | | | | | |
| | | | | | | | | | |
| Starting Salary & Title: | | | Ending Salary | / & Title: | | | | | |
| Reason for Leaving: | | | | | | | | | |
| May we contact this employer? | | | | | | | | | |
| Dates of Employment | From: | / | / | | | To: | / | / | |
| Company Name: | | | | Position Held: | | | | | |
| City: | State: | | | | Zip: | | | | |
| Phone: | Super | visor: | | | Title: | | | | |
| Responsibilities: | | | | | | | | | |
| | | | | | | | | | |
| Starting Salary & Title: | | | Ending Salary | / & Title: | | | | | |
| Reason for Leaving: | | | | | | | | | |
| May we contact this employer? | | | | | | | | | |
| "I certify that the facts in this application application shall be grounds for dismissal. all information concerning my previous er any damage that may result from utilization any agreement for employment for any squathorized KJB representative. This waive Americans with Disabilities Act (ADA) & or | I authorize investig mployment & any p on of such informat pecified period of ti or does not permit ti | gation of a pertinent i tion. I also ime, or to the releaso | all statements co information they o understand & a make any agree e or use of disab | ontained herein & the may have, personal agree that no represe ement contrary to the | e references or otherwise entative of the e foregoing, u | & employers | listed abovene company as any authouriting & sig | e to give you from all liab ority to ente gned by an | bility fo |

Date:

Signature of Applicant: