

Golden Age Cinemas, LLC

The McHenry Outdoor Theater
 1510 Chapel Hill Rd.
 Lakemoor, IL 60051
 www.goldenagecinemas.com

Employment Application

APPLICATE INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Date Available	Are you 16 years or older?	Desired Salary	
Position Applied for	Concession <input type="checkbox"/>	Lot / Security <input type="checkbox"/>	Box Office <input type="checkbox"/>
	Benefits	YES <input type="checkbox"/>	NO <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"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain

EDUCATION			
High School	Address		
From	To	Did you graduate?	Degree
		YES <input type="checkbox"/>	NO <input type="checkbox"/>
College	Address		
From	To	Did you graduate?	Degree
		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Other	Address		
From	To	Did you graduate?	Degree
		YES <input type="checkbox"/>	NO <input type="checkbox"/>

REFERENCES	
<i>Please list three professional references.</i>	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
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"/>			

AVAILABILITY				
Availability	<input type="checkbox"/> Sunday	From _____ To _____	<input type="checkbox"/> Thursday	From _____ To _____
	<input type="checkbox"/> Monday	From _____ To _____	<input type="checkbox"/> Friday	From _____ To _____
	<input type="checkbox"/> Tuesday	From _____ To _____	<input type="checkbox"/> Saturday	From _____ To _____
	<input type="checkbox"/> Wednesday	From _____ To _____		

DISCLAIMER AND SIGNATURE	
I certify that my answers are true and complete to the best of my knowledge.	
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.	
Signature	Date