



# PLAZA THEATRE OF HUMBOLDT TN

## EMPLOYMENT APPLICATION

### Application information

|                       |                                  |                 |          |
|-----------------------|----------------------------------|-----------------|----------|
| Full name:            | _____                            | Date:           | _____    |
|                       | <i>Last First M.I.</i>           |                 |          |
| Address:              | _____                            | Phone:          | _____    |
|                       | <i>Street address Apt/Unit #</i> |                 |          |
|                       | _____                            | Email:          | _____    |
|                       | <i>City State Zip Code</i>       |                 |          |
| Date Available:       | _____                            | S.S. no:        | _____    |
|                       |                                  | Desired salary: | \$ _____ |
| Position applied for: | _____                            |                 |          |

|                                                |                                                          |                        |
|------------------------------------------------|----------------------------------------------------------|------------------------|
| 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 yes, when? _____    |
| Have you ever been convicted of a felony?      | Yes <input type="checkbox"/> No <input type="checkbox"/> | If yes, explain? _____ |

### Availability

What days are you available to work?

Mon ☐ Tues ☐ Wed ☐ Thurs ☐ Fri ☐ Sat ☐ Sun ☐ Mornings ☐ Afternoons ☐ Evenings ☐

Valid Drivers License? Yes ☐ No ☐ Restrictions\_\_\_\_\_

## Emergency Contact

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Number \_\_\_\_\_

Relationship to Contact \_\_\_\_\_

## Education

|                   |       |                              |                             |
|-------------------|-------|------------------------------|-----------------------------|
| High school:      | _____ | Address:                     | _____                       |
| From:             | _____ | To:                          | _____                       |
| Did you graduate? |       | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Diploma:          | _____ |                              |                             |
| 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

Please list three professional references.

|            |       |               |       |
|------------|-------|---------------|-------|
| Full name: | _____ | Relationship: | _____ |
| Company:   | _____ | Phone:        | _____ |
| Address:   | _____ | Email:        | _____ |
| Full name: | _____ | Relationship: | _____ |
| Company:   | _____ | Phone:        | _____ |
| Address:   | _____ | Email:        | _____ |
| Full name: | _____ | Relationship: | _____ |
| Company:   | _____ | Phone:        | _____ |
| Address:   | _____ | Email:        | _____ |

## Previous Employment

|                                                          |                              |                             |                 |
|----------------------------------------------------------|------------------------------|-----------------------------|-----------------|
| Company :                                                | _____                        | Phone:                      | _____           |
| Address:                                                 | _____                        | Supervisor:                 | _____           |
| Job title:                                               | _____                        | From:                       | _____ To: _____ |
| Responsibilities:                                        | _____                        |                             |                 |
| May we contact your previous supervisor for a reference? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |                 |

|                                                          |                              |                             |                 |
|----------------------------------------------------------|------------------------------|-----------------------------|-----------------|
| Company :                                                | _____                        | Phone:                      | _____           |
| Address:                                                 | _____                        | Supervisor:                 | _____           |
| Job title:                                               | _____                        | From:                       | _____ To: _____ |
| Responsibilities:                                        | _____                        |                             |                 |
| May we contact your previous supervisor for a reference? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |                 |

|                                                          |                              |                             |                 |
|----------------------------------------------------------|------------------------------|-----------------------------|-----------------|
| Company :                                                | _____                        | Phone:                      | _____           |
| Address:                                                 | _____                        | Supervisor:                 | _____           |
| Job title:                                               | _____                        | From:                       | _____ To: _____ |
| Responsibilities:                                        | _____                        |                             |                 |
| 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:

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### 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:

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Date:

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