



Application For:
Choose a Location
<input type="checkbox"/> Chanhassen <input type="checkbox"/> Excelsior

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

Name (Last) _____ (First) _____ (Middle) _____

E-Mail Address _____

Address _____ City _____ State _____ Zip _____

Home Telephone _____ Cell _____

if you are under 18 years of age, please state your date of birth: _____

Position Applying For: Box Office/Concession Sales Attendant Usher Asst. Mgr./Shift Supervisor
 (check all that apply) Sales & Marketing Maintenance Staff Theater Manager

Are you interested in?
 (check all that apply) Full Time Part Time Summer Only

Date you are available to start work: _____

Our Theaters are open 365 days a year. Please check the days and shifts that you are able to work:

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
<input type="checkbox"/> Day	<input type="checkbox"/> Day	<input type="checkbox"/> Day	<input type="checkbox"/> Day	<input type="checkbox"/> Day	<input type="checkbox"/> Day	<input type="checkbox"/> Day
<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening

EDUCATION

School	Name & Location of School	# of Years	Graduated?	Degree/Area of Study
High School			<input type="checkbox"/> Yes <input type="checkbox"/> No	
College			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Graduate School			<input type="checkbox"/> Yes <input type="checkbox"/> No	

SPECIAL SKILLS

Do you have experience with any of the following equipment: (Check all that apply)

Point of Sale Concession Equipment Digital Projection Equipment

Other (List): _____

LEGAL

Are you a U.S. Citizen? Yes No -- If no, do you have a legal right & necessary documents to work in the U.S.? Yes No
 (Identity and employment eligibility of all new hires will be verified as required by the Immigration Reform and Control Act of 1986)

Have you ever been discharged by any company? Yes No

If yes, give the name of the company(ies): _____

Reason for discharge: _____

Have you ever been convicted of a crime other than a minor traffic violation? Yes No

If yes, please explain the offense and final disposition of the case: _____

EMPLOYMENT HISTORY

List employment starting with your most RECENT position.

May we contact your PRESENT employer? Yes No May we contact your PAST employer(s) Yes No

Previous Employment Dates	Name/Address/Phone of Previous Employers	Wage / Salary	Position	Reason For Leaving
From: To:				
From: To:				
From To:				

Have you previously worked for Five Star Cinemas? No Yes -- If yes, please provide the following information:

LOCATION (City/State): _____ POSITION HELD: _____

DATES EMPLOYED From: _____ To: _____

Reason for leaving: _____

REFERENCES

List personal references only. DO NOT list former employers or relatives. If work phone number is not available, provide home phone number.

Name	Address	Work Phone	Years Known

PLEASE READ CAREFULLY

Various Federal, State, and Local Laws prohibit discrimination based on race, sex, religion, national origin, age or disability. Five Star Cinemas is an EQUAL OPPORTUNITY EMPLOYER and your response to any question will NOT be used as a basis for discrimination, but will be judged on its relevance to the position you are seeking.

In submitting this application for employment, I understand that an investigation may be made whereby information is obtained regarding my character, previous employment, general reputation, educational background, credit record and/or criminal history. I authorize anyone possessing this information to furnish it to Five Star Cinemas and/or a third party company upon request and I release anyone, and any third party company from all liability and damages whatsoever in furnishing, obtaining, or using said information.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in immediate dismissal. I understand, also, that I am required to abide by all rules and regulations of Five Star Cinemas, LLC.

Thank you for completing this application and for your interest in employment with us. We would like to assure you that your opportunity for employment will be based only on your ability and on no other consideration.

Please double-check all the information you entered above and verify that it is all correct before submitting the application.

Signature of Applicant

Date