

STARDUST

DRIVE IN THEATER

Employment Application (An Equal Opportunity Employer)

Name: _____
 First M.I. Last

Current Address: _____
 House Number, Street Town State

Phone Number _____
 Cell Home

Birth Date: _____
 Month/Day/Year

Are you legally eligible for employment in the US? _____

Have you ever been convicted of a criminal offense: _____

If yes for what and when _____

Education:

Please circle the highest level completed: Elementary High school College

If you are still in school, what grade are you in? _____

What extracurricular activities are you involved in?
(Music/Drama/Sports/Church/Ect.): _____

Work Experience:

Place of Employment: _____ Job title: _____

Starting wage: _____ Ending wage: _____ Dates Employed: _____

Job Duties: _____

Supervisor Name: _____ Phone: _____

Reason for Leaving: _____

Place of Employment: _____ Job title: _____

Starting wage: _____ Ending wage: _____ Dates Employed: _____

Job Duties: _____

Supervisor Name: _____ Phone: _____

Reason for Leaving: _____

Place of Employment: _____ Job title: _____

Starting wage: _____ Ending wage: _____ Dates Employed: _____

Job Duties: _____

Supervisor Name: _____ Phone: _____

Reason for Leaving: _____

References (non-family or work)

Name: _____ Relation: _____ Phone Number _____

Name: _____ Relation: _____ Phone Number _____

Name: _____ Relation: _____ Phone Number _____

Position Desired: _____

Wage Desired: _____

Date Available to Start: _____

Are you employed now? _____ By whom: _____

Can we contact your present employer? _____

What days are you unavailable to work? _____

We are open from March to November. Will you be able to work the entire season? _____

If not, when will you leave? _____

We can be open as late as 5am. How late can you work? _____

Do you have any physical limitations that will keep you from performing any work that you will be

Considered for? _____

If so please describe: _____

I certify that the fact contained in this application are true and complete to the best of my knowledge and I understand that, if employed, and falsified statements on this application are grounds for dismissal.

I authorize investigation of all statements contained herein and the references and any pertinent information they may have, personal or otherwise, and release all parties from liability for any damages that may result from furnishing the same to you.

I understand and agree that, if hired, my employment is for no definite period of time and may, regardless of the date of payment of my wages and salary, be terminated at any time without any prior notice.

Signature: _____ Date: _____