

TEXAS MOVIE BISTRO EMPLOYMENT APPLICATION

PERSONAL INFORMATION

Name _____

Street Address _____ Date of Birth ____ / ____ / ____

Apt/Unit ____ City _____ State ____ Zip _____ Are you a US citizen? YES NO

Phone (____) ____ - ____ Email Address _____

Desired Hourly Wage \$ _____ Position Desired _____ Date You Can Begin Work ____ / ____ / ____

Have you ever been convicted of a felony? YES NO If YES, please explain: _____

Have you ever worked at Texas Movie Bistro before? YES NO

Were you referred by a Texax Movie Bistro current employee? YES NO If YES, who? _____

AVAILABILITY

In the boxes provided below please indicate when you CAN work each day of the week.

	FRIDAY	SATURDAY	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY
I can arrive for work at:							
I must leave work at:							
Are you seeking FULL TIME or PART TIME employment? _____	How Many Hours Each Week Would You Like to Work? _____						

Weekends and Holidays are required. Must be at least 16 years old.

PREVIOUS OR CURRENT EMPLOYMENT

Employer _____ Hourly Pay Rate \$ _____ Position _____

Employer Address _____ City _____ State ____ Zip _____

Employer Phone Number (____) ____ - ____ Supervisor Name _____ May we contact? YES NO

Employed from (month/year) ____ / ____ to ____ / ____ Reason for Leaving _____

Employer _____ Hourly Pay Rate \$ _____ Position _____

Employer Address _____ City _____ State ____ Zip _____

Employer Phone Number (____) ____ - ____ Supervisor Name _____ May we contact? YES NO

Employed from (month/year) ____ / ____ to ____ / ____ Reason for Leaving _____

EDUCATION

Name of school:	City, State & Phone Number:	Dates Attended:	Graduated?	Degree/Mi or/Course of Study:	
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO

MOVIES... WHAT DO YOU LIKE?

Please list the last three films you have seen and let us know what you thought about them...

Name of film:	What did you think about this film?

I certify that all answers given herein are true and complete to the best of my knowledge.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature of Applicant _____ Date _____