

HOYTS

CINEMAS

Hoyts Cinema
530 Bushy Hill Rd
Simsbury, CT 06070

APPLICATION FOR EMPLOYMENT

Date available to begin work _____ / _____ / _____

Rate of pay expected \$ _____ Per _____

Name	_____	_____	_____	S.S. No.	_____
	Last	First	Middle Initial		
Present Address	_____	_____	_____		
	No.	Street	City		
	_____	_____	_____	Phone No.	() _____
	State		Zip		
Permanent Address	_____	_____	_____		
	No.	Street	City		
	_____	_____	_____	Phone No.	() _____
	State		Zip		

The company does not discriminate in hiring or employment on the basis of race, color, religion, national origin, sex, marital status, ancestry, age (as defined by applicable law) legally recognized handicap, or veteran status. No question on this application is intended to secure information to be used for any discriminatory purpose.

PERSONAL

Were you previously employed by this company? No Yes _____ / _____
 Have you applied to this company before? No Yes _____ / _____
 Are you under 16 years of age?* No Yes _____ / _____
 Are you 16 or 17 years or age?* No Yes _____ / _____

*Due to child labor laws, if question arises, we reserve the right to request the Birth Certificate for an applicant who appears to be under 18 years of age.

Are you a citizen of the United States, or an alien with a valid Alien Registration Card, or an alien legally registered with the U.S. Immigration and Naturalization Service?

Yes No

Have you ever been convicted of a felony?* No Yes

Have you been convicted of a misdemeanor or completed a period of incarceration within the past five years, with the exception of a first conviction for drunkenness, simple assault, speeding, minor traffic violations, affray, or disturbance of the peace?*

No Yes

If your answer to either of the above questions is yes, please explain: _____

Have you been bonded (Management applicants only?) No Yes With what employers? _____

Emergency notification:

Name _____ Relationship _____
 Last First Middle Initial
 Address _____
 No. Street City
 State Zip Phone No. () _____

EDUCATION

School	Name and Location of School	Course of Study	Did You Graduate?	Years Completed	Degree of Diploma
College	/		<input type="checkbox"/> Yes <input type="checkbox"/> No		
High	/		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Elementary	/		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Other	/		<input type="checkbox"/> Yes <input type="checkbox"/> No		

Complete this section if you served in the U.S. armed forces

MILI-TARY

Describe your duties and any special training _____

Period of Active Duty _____ / _____
 From To

Branch of Service _____

Rank at Discharge _____

Date of Final Discharge _____ / _____

* Statement to Applicant: In answering the following question, please be advised that your past conviction(s) of crime is not an automatic bar(s) to your employment. Where relevant, it will be considered with your application as a whole.

An applicant for employment with a sealed record on file with the Commissioner of Probation may answer "no record" with respect to an inquiry herein relative to prior arrests, criminal court appearances or convictions. In addition, any applicant for employment may answer "no record" with respect to any inquiry relative to prior arrests, court appearances and adjudications in all cases of delinquency or as a child in need of services which did not result in any complaint transferred to the Superior Court for criminal prosecution

EMPLOYMENT

Please give accurate, complete full-time and part-time employment record. Start with present or most recent employer.

1 Company Name _____ Location _____
 Address _____ Location _____
 Name of Supervisor _____
 State Job Title _____
 Describe your work _____

Employed _____ / _____ / _____
 From _____ To _____
 Rate of Pay _____ / _____ / _____
 Start _____ Last _____
 Telephone () _____
 Reason for Leaving _____

2 Company Name _____
 Address _____
 Name of Supervisor _____
 State Job Title _____
 Describe your work _____

Employed _____ / _____ / _____
 From _____ To _____
 Rate of Pay _____ / _____ / _____
 Start _____ Last _____
 Telephone () _____
 Reason for Leaving _____

3 Company Name _____
 Address _____
 Name of Supervisor _____
 State Job Title _____
 Describe your work _____

Employed _____ / _____ / _____
 From _____ To _____
 Rate of Pay _____ / _____ / _____
 Start _____ Last _____
 Telephone () _____
 Reason for Leaving _____

We may contact the employers listed above unless you indicate those you do not want us to contact.

Employer Number(s) _____ Reason _____

REFERENCES

Give the names of three persons not related to you, whom you have known at least one year.

Name	Address	Business	Phone	Years
			()	
			()	
			()	

Give the names of any friends or relatives who have worked or are working for the company.

Name	Relationship	Theatre	Dates

MISC.

Membership in professional or trade organizations _____
 (Exclude those which may disclose your race, color, religion or national origin)

Are there any other experience, skills or qualifications which you feel would especially fit you for service with this company?

I understand and agree that any employee handbook or other employment policies provided by the company of which I may receive or become aware will not constitute an implied or express employment contract, but will be merely a gratuitous statement of the company's current policies. Notwithstanding the fact that the company may, in its sole discretion, give written warnings from time to time to various employees for failure to perform properly or to follow company policy, no such warnings are required prior to termination. I understand and agree that if I am offered employment with the company, my employment will be for no definite term and that either I or the company will have the right to terminate the employment relationship at any time, with or without cause, and with or without notice. I also understand that this status can only be altered by a written contract of employment which is specific to all material terms and is signed by me and the president of the company.

It is unlawful in Massachusetts to require or administer a lie detection test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

I certify that the information included on this application form is accurate and complete. I understand that my application and references may be investigated by the Company, and that giving incomplete or inaccurate information may result in rejection of this application, or may result in disciplinary action and/or dismissal if discovered after employment commences. I understand that an offer of employment is subject to a satisfactory check of references.

Date _____ / _____ / _____ Signature of Applicant _____

SCHEDULING

Are you available for full-time work? Yes No

WEEK DAYS (Daytime) _____

WEEK NIGHTS _____

WEEK-ENDS (Daytime) _____

WEEK-ENDS (Evening) _____

HOLIDAYS (Daytime) _____

HOLIDAYS (Evening) _____

INTERVIEWER

Interviewer should discuss job opportunity and assess suitability of applicant for that job.

Interviewer 1 _____ Date ____ / ____ / ____

Neatness	Personality	Interest
Character	Ability	Applicable Experience

Interviewer 2 _____ Date ____ / ____ / ____

Neatness	Personality	Interest
Character	Ability	Applicable Experience

REFERENCE CHECK

Before final approval is given for applicant to begin working, a profile must be established. Use the Reference Check forms to verify the information stated by the applicant and summarize below. Attach reference check forms to application.

Reference 1

All information checks out Yes No Reference is: Excellent Good Fair Poor

Reference 2

All information checks out Yes No Reference is: Excellent Good Fair Poor

Reference 3

All information checks out Yes No Reference is: Excellent Good Fair Poor

STATUS

Hired Yes No (circle one) Full-Time Part-Time

Reporting Date ____ / ____ / ____ Location _____ Salary _____

Initial Salary Review ____ / ____ / ____ Benefits Eligibility Date ____ / ____ / ____