

4. When would you be available to start working? _____
5. Premiere Cinemas is open 365 days a year. Working holidays is a Must. Are there any weekends or holidays you cannot work? Yes No If yes, when? _____
6. Are there any Hours, Shifts, Days you cannot work? Yes No If yes, please specify?

7. Can you perform any or all of the job functions for the position you are seeking, either with or without reasonable accommodation? Yes No
8. Can you meet the attendance standard of our company, which requires all employees to report for work on time for all scheduled days or shifts? Yes No

EMPLOYMENT EXPERIENCE

Directions: Begin with your present or last job. Account for all periods of time, including military experience, and periods of unemployment and the nature of your activities. Since we will make every effort to contact previous employers, the correct telephone numbers are appreciated.

THE FOLLOWING MUST BE COMPLETED IN DETAIL- RESUMES ARE NOT ACCEPTED IN LIEU OF THIS INFORMATION.

| | | | | |
|----|--|---|------------------------------------|-----------------------------|
| 1. | Employer | Dates Employed | | Key Responsibilities |
| | | From | To | |
| | Address | | | |
| | | <input type="checkbox"/> Full-Time | <input type="checkbox"/> Part-Time | |
| | Telephone Number | Supervisor's Name, Title and Telephone Number | | |
| | Job Title | | | |
| | Reason for Leaving: <input type="checkbox"/> Resigned <input type="checkbox"/> Laid off <input type="checkbox"/> Discharged Why? | | | |

| | | | | |
|----|--|---|------------------------------------|-----------------------------|
| 2. | Employer | Dates Employed | | Key Responsibilities |
| | | From | To | |
| | Address | | | |
| | | <input type="checkbox"/> Full-Time | <input type="checkbox"/> Part-Time | |
| | Telephone Number | Supervisor's Name, Title and Telephone Number | | |
| | Job Title | | | |
| | Reason for Leaving: <input type="checkbox"/> Resigned <input type="checkbox"/> Laid off <input type="checkbox"/> Discharged Why? | | | |

EDUCATION AND TRAINING

| TYPE of SCHOOL | SCHOOL NAME, CITY and STATE | MAJOR | Choose Last Year |
|--------------------|-----------------------------|--|--|
| High School | | | <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 |
| Community College | | From: _____ To: _____ Degree: <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> 1 <input type="checkbox"/> 2 |
| College/University | | From: _____ To: _____ Degree: <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 |
| Graduate School | | From: _____ To: _____ Degree: <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 |

| | | | | |
|-----------------------------|--|--------------------------|--|---|
| Business/Trade/Other School | | From: _____ To: _____ | Degree: <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 |
|-----------------------------|--|--------------------------|--|---|

EMPLOYMENT REFERENCES

| Name | Business Relationship | Organization/Address | Telephone |
|------|-----------------------|----------------------|-----------|
| | | | |
| | | | |
| | | | |

CERTIFICATION

DIRECTIONS: PLEASE READ THE FOLLOWING CAREFULLY AND INITIAL BEFORE SIGNING THIS APPLICATION FORM.

Accuracy: I hereby certify that I have personally completed this application, that the answers given by me are true and complete, and that no material fact has been omitted. I understand that any false statements appearing on this or any other employment form will be sufficient reason to end further consideration of this application and not hire me; if discovered after my employment, such false statement will be sufficient reason for dismissal from the services of Premiere Cinemas regardless of the time that has elapsed before discovery.

Print/Typed

Signed

Reference Checks: I authorize Premiere Cinemas or its designated agents to contact my references and to investigate my past employment, education credentials, Department of Motor Vehicles driving record, and other employment-related activities, without giving me prior notice of such disclosure. I agree to cooperate in such investigations and release those parties supplying such information to Premiere Cinemas from all liability or responsibility with respect to information supplied to Premiere Cinemas.

Print/Typed

Signed

- Where an outside company conducts such an investigation, I request, authorize and consent to the procurement of an Investigative Consumer Report and understand that it may contain information about my background, mode of living, character, personal characteristics and general reputation; where the job requires a credit check, a separate authorization will be provided. This authorization in original or copy format, shall be valid for one year from the date indicated next to my signature below. According to the Fair Credit Reporting Act, I will be notified if employment is denied because of information obtained from a Consumer Reporting Agency. Additionally, I understand that if requested within 60 days, I will be given a full and accurate disclosure as to the nature and substance of all information provided.

Contingencies: Where a conditional offer of employment is made, I acknowledge it is contingent upon Premiere Cinemas performing any of the following: drug and alcohol screening, medical fitness for duty examination, criminal convictions*, and when applicable to the job a credit check. Should a conditional offer of employment be made, a separate authorization and disclosures will be provided. (*) In accordance with company policy, an individual assessment will be made, including the information reviewed for job-relatedness and time since last conviction.

Print/Typed

Signed

At-Will Employment: I understand that filing this application in no way assures me a position with Premiere Cinemas, and that this application is not, and is not intended to be, a contract of employment. I understand that if employed, my employment and compensation can be terminated at will, with or without cause, and with or without notice, at any time, and at the option of either Premiere Cinemas or myself. I further understand that no one other than the Owner of Premiere Cinemas has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing.

Print/Typed

Signed

Print/Typed Signature of Applicant

Signature of Applicant

Date