

SOUTHGATE CINEMA COMPLEX, LLC
 410 FLORENCE ROAD
 SAVANNAH, TN 38372

APPLICATION FOR EMPLOYMENT
- Please Return To Manager -

Full Name: _____ Home Phone: (____) _____

Social Security # _____ D.O.B: _____ Cell Phone: (____) _____

Street Address: _____ APT# _____ P.O. BOX _____

City: _____ ST: _____ ZIP: _____ Are you legally able to be
 employed in the U.S.? _____

AVAILABILITY

HOURS YOU CAN WORK:

	M	T	W	TH	F	SA	SU
FROM:							
TO:							

DO YOU HAVE
 TRANSPORTATION TO AND FROM WORK? _____

WILL YOU REMAIN EMPLOYED
 ELSEWHERE IF HIRED BY SOUTHGATE CINEMA? _____

EDUCATION

SCHOOL: _____

CURRENT GRADE: _____ GPA: _____ ARE YOU CURRENTLY ENROLLED? _____

EXTRA-CURRICULAR ACTIVITIES: _____

EMPLOYMENT HISTORY

LIST PREVIOUS EMPLOYERS, STARTING WITH CURRENT OR MOST RECENT

COMPANY: _____ PHONE: (____) _____

ADDRESS: _____ DATES OF
 EMPLOYMENT _____ TO _____

SUPERVISOR: _____ JOB _____ SALARY _____

COMPANY: _____ PHONE: (____) _____

ADDRESS: _____ DATES OF
 EMPLOYMENT _____ TO _____

SUPERVISOR: _____ JOB _____ SALARY _____

SIGNATURE OF APPLICANT: _____ **DATE:** _____