

**Princess Theater**  
**101 W Monroe, Mount Ayr, IA**  
**641-464-2466**  
**Application**

We are an equal opportunity employer. We do not discriminate on the basis of race, color, religion, age, gender, national origin or non-disqualifying disability.

PLEASE PRINT

FULL NAME: \_\_\_\_\_  
Last First Middle

ADDRESS: \_\_\_\_\_  
Street APT.  
\_\_\_\_\_  
City State Zip Code

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_ SOCIAL SECURITY #: \_\_\_\_\_

POSITION APPLIED FOR: \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_

REFERRED BY: \_\_\_\_\_ WHEN COULD YOU START? \_\_\_\_\_

ARE YOU AVAILABLE  
TO WORK THE  
FOLLOWING HOURS?:

Friday 6 -10 PM

Saturday 6 – 10 PM

Sunday 1 -5PM


HAVE YOU EVER BEEN CONVICTED OF A CRIME (OTHER THAN A MINOR TRAFFIC OFFENSE)? ☐ YES ☐ NO  
IF "YES", PLEASE EXPLAIN: \_\_\_\_\_

WHAT STRENGTHS DO YOU HAVE THAT WILL HELP YOU TO SUCCEED AT THIS POSITION?

WHAT SHORTCOMINGS OR AREAS OF IMPROVEMENT DO YOU HAVE?

WHAT SKILLS WOULD YOU BRING TO THIS POSITION THAT IS IMPORTANT?

IF IN HIGH SCHOOL, WHAT ACTIVITIES ARE YOU INVOLVED IN?

**Include 3 references:** \_\_\_\_\_

**Education**

EDUCATION	NAME OF SCHOOL	LOCATION	YEARS ATTENDED	DEGREE OBTAINED	SUBJECT
HIGH SCHOOL					
COLLEGE BUS OR TRADE SCHOOL					
PROFESSIONAL SCHOOL					
OTHER					

**Previous Employment**

DATES FROM TO	BUSINESS NAME & ADDRESS	DUTIES	SALARY	SUPERVISOR	REASON FOR LEAVING

ARE YOU LEGALLY ELIGIBLE TO WORK IN THE UNITED STATES: YES \_\_\_\_\_ NO \_\_\_\_\_

**Send completed application to****Princess Theater**

MAIL: P.O. Box 468 – Mount Ayr, Iowa 50854

OR DROP OFF DURING MOVIE TIMES: 101 W. Monroe St. – Mount Ayr, Iowa 50854

**CERTIFICATION, INFORMATION RELEASE & AT-WILL DISCLAIMER**

- I certify that the information contained in this application is true, complete and accurate in all respects.
- I understand that if I am employed, any later determination that this application contains false, incomplete, inaccurate or misleading information shall be grounds for my immediate discharge.
- I hereby authorize you to verify the accuracy of the information contained in this application and to investigate my background and suitability for employment.
- I authorize and direct any and all persons with knowledge or information concerning me or my background, including, but not limited to, former employers, consumer credit reporting agencies, information service bureaus and law enforcement agencies, to provide all such information to you, and I hereby release you and all such persons from any and all liability arising therefrom.

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Signature of Applicant

Date