

Please print this page, fill out the form and bring it to Sunset Video during normal business hours. Thank you.



Sunset

Sunset Theatre Employment Application

Name _____ Phone _____

Address _____ Age _____

Social Security Number _____ Referred by _____

Position Desired _____ Date available to start _____

Are you currently employed? Y N Salary desired _____

Education:

Elementary School _____

Middle School _____

High School _____ Year Graduated _____

College _____ Year Graduated _____

Previous Employers:

Dates		Name of Employer	Position	Salary
From	To			
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Personal References:

Name _____ Phone _____

Name _____ Phone _____

In case of Emergency Notify:

Name _____ Phone _____

Applicant's Signature _____ Date _____