



Employment Application

Date: _____

Name: _____

Last
First
Middle

Soc. Sec. No.: _____ - _____ - _____

Address: _____

No. and Street
City
State
Zip

Telephone: () _____ Email: _____

I am applying for: Food & Beverage Ushering Other: _____

Please indicate when **you will generally be available to work.**

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Day							
Evening							

First available date to work: _____ Total hours available per week: _____

How did you hear about this position? _____

Are you over the age of 16? Yes No

Are you over the age of 21? Yes No

Are you eligible to work in the United States? Yes No

Have you ever been employed by the Auditorium Theatre of Roosevelt University?
 If yes, when and in what position? Yes No

Have you ever been convicted of a felony or a crime involving honesty? If yes, please describe: Yes No

Education

	Name and Location	Courses Taken	Last Year Completed	Graduation Date
High School				
College		<small>Major Degree</small>		
Other				
Other				

Previous Employment – Please begin with your most recent position.

Name and Address of Company and Type of Business	Starting Date		Ending Date		Starting Weekly Wage	Ending Weekly Wage	Reason for Leaving	Name of Supervisor
	Month	Year	Month	Year				
	Describe the work you did:							
Phone: () –								

Name and Address of Company and Type of Business	Starting Date		Ending Date		Starting Weekly Wage	Ending Weekly Wage	Reason for Leaving	Name of Supervisor
	Month	Year	Month	Year				
	Describe the work you did:							
Phone: () –								

Name and Address of Company and Type of Business	Starting Date		Ending Date		Starting Weekly Wage	Ending Weekly Wage	Reason for Leaving	Name of Supervisor
	Month	Year	Month	Year				
	Describe the work you did:							
Phone: () –								

Please describe why you should be hired to fill the position for which you have applied. Please state qualifications that would assist in your employment or other applicable skills or experience not otherwise noted on this application. Please feel free to attach additional sheet(s), if necessary.

I authorize the investigation of all information set forth in this application. I understand that if hired, misrepresentation or omission of facts in this application may result in dismissal. If I am hired by the Auditorium Theatre of Roosevelt University, I understand that my employment is “at will”, which means that I or the employer can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by law. I understand that no representative of the Auditorium Theatre of Roosevelt University, other than the Executive Director, has the authority to enter into any agreement for employment.

Date: _____

Signature: _____

IMPORTANT: The applicant must be signed and dated, or it will not be processed.

Please mail this completed application to:

The Auditorium Theatre of Roosevelt University
 Attn: Personnel
 50 East Congress Parkway
 Chicago, IL 60605