



CENTURY THEATRES. CinéArts Tinseltown rave cinemas

EMPLOYMENT APPLICATION

POLICY STATEMENT: Cinemark is proud to be an equal opportunity employer. It is the Company's policy to recruit, hire, train, promote, reassign, compensate, and administer all other personnel actions without regard to age, sex, race, color, national origin, ancestry, citizenship, religion, physical or mental disability, marital status, military or veteran status, sexual orientation, gender identity, genetic information, or medical condition (including, but not limited to pregnancy), or any other characteristic protected under federal, state and local laws. Cinemark also provides reasonable accommodations to applicants and employees with disabilities and for sincerely held religious beliefs or practices to the fullest extent required by law. If you would like to request an accommodation or believe that you have been subject to discrimination, please contact the Company's Human Resources Department at 972-665-1000 or human.resources@cinemark.com.

(PLEASE PRINT)

Date of Application: _____ Position(s) Applied For: _____ 2nd Choice: _____

Referral Source: ☐ Advertisement ☐ Friend ☐ Relative ☐ Walk-In ☐ Employment Agency ☐ Other _____

NAME	DATE AVAILABLE TO START
ADDRESS	HOME PHONE
CITY STATE ZIP	CELL PHONE
SALARY DESIRED	EMAIL ADDRESS

1. If you become employed, and you are under 18, can you furnish a work permit (if required by law)? ☐ Yes ☐ No
 2. Have you filed an application with Cinemark before? ☐ Yes ☐ No If yes, give date: _____
 3. Have you ever been employed with Cinemark before? ☐ Yes ☐ No If yes, give dates: _____ to _____
 4. Do you know anyone who works for Cinemark? ☐ Yes ☐ No If yes, who? _____
 5. If you are currently employed, may we contact your present employer? ☐ Yes ☐ No
 6. Are you legally authorized to work in the United States? ☐ Yes ☐ No
(Proof of work authorization is required upon hire)
 7. Are you available to work ☐ Full Time ☐ Part Time ☐ Shift Work ☐ Temporary
Total hours available to work per week: _____
- | | F | Sa | Su | M | T | W | Th |
|------------------|------|----|----|---|---|---|----|
| Times available: | FROM | | | | | | |
| | TO | | | | | | |
8. Are you on a lay-off and subject to recall? ☐ Yes ☐ No
 9. Can you travel if a job requires it? ☐ Yes ☐ No
 10. Are you able to perform the job functions of the position as outlined in the job description, either with or without accommodation? ☐ Yes ☐ No
 11. Do you have a valid driver's license? ☐ Yes ☐ No State _____
 12. Have you ever been discharged for cause? ☐ Yes ☐ No If yes, please explain: _____

EDUCATION

TYPE	NAME AND LOCATION	DEGREES, DIPLOMAS, ETC	MAJOR COURSE OF STUDY	SEM/QTR HOURS OR UNITS		
				FULL TIME	PART TIME	CORRES.
HIGH SCHOOL						
TECHNICAL SCHOOL						
COLLEGE						
COLLEGE						
OTHER						
VOCATIONAL TRAINING: ☐ D.E ☐ VOE ☐ OTHER	SPECIAL ACCOMPLISHMENTS OR AWARDS WHILE AT SCHOOL:					

PRIOR EMPLOYMENT HISTORY

List all employment beginning with your present or last position. Information in this column must be fully completed, even if employment history is supplemented by a resume. If you need more space, please attach additional pages.

EMPLOYER	PHONE NO.	YOUR TITLE
ADDRESS		DUTIES
FROM: MO.	YEAR	TO: MO. YEAR
IMMEDIATE SUPERVISOR		
BASE EARNINGS: START \$	LAST \$	PER
REASON FOR LEAVING		

EMPLOYER	PHONE NO.	YOUR TITLE
ADDRESS		DUTIES
FROM: MO.	YEAR	TO: MO. YEAR
IMMEDIATE SUPERVISOR		
BASE EARNINGS: START \$	LAST \$	PER
REASON FOR LEAVING		

EMPLOYER	PHONE NO.	YOUR TITLE
ADDRESS		DUTIES
FROM: MO.	YEAR	TO: MO. YEAR
IMMEDIATE SUPERVISOR		
BASE EARNINGS: START \$	LAST \$	PER
REASON FOR LEAVING		

Please list any other relevant experience you would like us to consider: _____

DISCLOSURES, CONSENTS & ACKNOWLEDGEMENTS

As a condition of employment, you must successfully pass any and all background and reference checks or other screening procedures (which may include, but are not limited to, criminal history inquiries and criminal background checks) which the Company determines to be necessary or desirable. Further disclosure will be provided and additional authorizations will be requested, as required by applicable law.

Smoking is prohibited in all places of employment. Smoking is prohibited in all work areas including, but not limited to, common work areas, auditoriums, classrooms, conference and meeting rooms, private offices, elevators, hallways, lobbies, medical facilities, cafeterias, employee lounges, stairs, restrooms, business vehicles and all other enclosed facilities. Employees who violate this policy are subject to disciplinary action and criminal sanctions.

Arkansas Applicants: By my signature below, I hereby give consent to any and all prior employers of mine to provide information with regard to my employment with prior employers to Cinemark.

Maryland Applicants: UNDER MARYLAND LAW, AN EMPLOYER MAY NOT REQUIRE OR DEMAND, AS A CONDITION OF EMPLOYMENT, PROSPECTIVE EMPLOYMENT, OR CONTINUED EMPLOYMENT, THAT AN INDIVIDUAL SUBMIT TO OR TAKE A POLYGRAPH EXAMINATION OR SIMILAR EXAMINATION OR SIMILAR TEST. AN EMPLOYER WHO VIOLATES THIS LAW IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE NOT EXCEEDING \$100.00.

Massachusetts Applicants: It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

Minnesota Applicants: In the event a background check report is obtained:

- You have the right to submit a written request to the reporting agency in order to obtain additional information on the nature and scope of the report.
- You may receive a free copy of the background check report if you check this box ☐

AT-WILL EMPLOYMENT

Employment with the Company is at-will which means the employment relationship may be terminated with or without cause and with or without notice at any time by you or the Company. In addition, the Company may alter an employee's position, duties, title or compensation at any time, with or without notice and with or without cause. Nothing in this application or in any document or statement and nothing implied from any course of conduct shall limit the Company's or employee's right to terminate employment at-will. *Only the Company Chief Executive Officer is authorized to modify the Company's at-will employment policy or enter into any agreement contrary to this policy. Any such modification must be in writing and signed by the employee and the Chief Executive Officer.* In Montana, the at-will nature of employment ends at the end of your probationary period, or, if there is not a probationary period, after 6 months of employment.

By my signature below, I certify that I have read and understood the information and instructions in this employment application, and I verify the truth and accuracy of the statements I have made, orally, in this application, or on any supporting documents. I further understand that the Company will rely upon the accuracy of these statements in making its hiring decision, and that any false statement or material omission will be grounds for denying or terminating employment.

Applicant's Signature _____

Date: _____