

25 Studney Drive Hay River, NT X0E0R6 P: (867) 874-2492 F: (867) 874-6558 theatre@northwestel.net

## JOB APPLICATION FORM

Please fill out application, print and sign	. Then forward on to the appropriate dej	bartment.	
PERSONAL INFORMATION			
Applicants Full Name			
Street Address	City		
Province	Postal Co	Postal Code	
Daytime Phone	Evening 1	Evening Phone	
Birth Date		LE MALE	
E-mail	SIN (Opt	cional)	
Are you a permanent resident of the YES NO  EDUCATIONAL BACKGROU		TES, for how long?	
Please provide a brief overview of			
School	Ç		
Dates			
School	Level Completed		
Date			
WORK EXPERIENCE			
Please place most recent employer	first.		
Company	Title	Dates	
Company	Title	Dates	
Company	Title	Dates	



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## **REFERENCES**

Please provide 2 references.

Reference #1			
Name	Contact Info.		
Company	Position		
Reference #2			
Name	Contact Info.		
Company	Position		
MISCELANEOUS INFORMATION			
Are you involved in any extracurricular activities:  ☐ Yes ☐ No	How many shifts can you work per week (minimum requirement of 3 shifts per week):  3 4 5 6 7		
What days of the week are you available to work?  Monday  Tuesday  Wednesday  Thursday  Friday  Saturday  Sunday			
I certify that the above mentioned information is true. I authorize the Riverview Cineplex to contact my references if needed.			
Applicants Signature	Date		