NEW EMPLOYEE INFORMATION SHEET

(This Information is NOT to be requested before employment)

Welcome to our Organization! We are glad to have you with us.
Please complete the form as accurately and completely as possible

THEATRE:_____ **CITY**:_____

HIRE / REHIRE DATE: _____/ _____ / ____
Mo. Day Yr.

PERSONAL DATA:

NAME:_____ **SOCIAL SECURITY NO**:_____-_____-_____
Last First MI

ADDRESS:_____
Street City State Zip

PHONE: (____)-____-_____ **DATE OF BIRTH**: ___ / ___ / ___ **GENDER**:_____
A/C Number Mo. Day Yr. M/F

NOTE: If you are a student, please list parent's home address and phone where wage information may be forwarded:

STREET ADDRESS _____

CITY_____ **STATE**_____ **ZIP**_____ **PHONE** (___) ____- _____

DEPENDENT STATUS: ___SINGLE ___MARRIED

NUMBER OF DEPENDENTS CLAIMED ON W-4: _____

Have you been previously employed at this or any other CEC Theatre facility or subsidiary? ____YES ____NO

If yes, Please list where you worked: _____ Dates Worked _____

Please list any relatives working for this or any other CEC Theatre Facility

Relatives: _____

Employee Signature _____

For Office Use Only. Managers Please Complete Pay-Rate and Department Numbers.

EMPLOYEE NUMBER:_____ **PAY RATE**: _____

DEPARTMENT NUMBERS: _____, _____, _____

4/11/2006