



# CAST MEMBER/CALL CENTER APPLICATION FOR EMPLOYMENT

(Please print plainly in ink)

Position applied for: \_\_\_\_\_

(Please Check One)  
Part Time: \_\_\_\_\_ Full Time: \_\_\_\_\_

Wage requirements: \_\_\_\_\_

## Equal Employment Opportunity Employer:

It is the policy and practice of CEC Entertainment Inc., d/b/a Chuck E. Cheese's ("CEC") to abide by all anti-discrimination laws provided for by federal, state, and local statutes and regulations. It is also the policy and practice of CEC to provide and promote equal employment opportunities for all applicants and employees and to hire, train, promote, compensate, and administer all employment practices without regard to race, color, sex, age, marital status, sexual orientation, medical condition, genetics, religion, veteran status, national origin, disability unrelated to the ability to perform the essential functions of the job or other protected category. Furthermore, CEC is committed to complying with the Americans with Disabilities Act and ADAAA. If you believe that you need a reasonable accommodation in order to apply for or complete an application for employment, please notify the company within three (3) days of your application of your specific need for a reasonable accommodation so that CEC can assist you where appropriate. **Note to Massachusetts and Maryland Applicants:** CEC does not require or administer a lie detector test or similar test as a condition of employment or continued employment. **Note to Rhode Island Applicants:** CEC is subject to Chapters 29-38 of Title 28 of the General Laws of Rhode Island, and is therefore covered by the state's worker's compensation law.

List ALL addresses for the past 10 years. (add sheets if necessary)

Name: \_\_\_\_\_

Last	First	Middle	Maiden
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Current Address: \_\_\_\_\_ Years: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Previous Address: \_\_\_\_\_ Years: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Cell Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Have you ever used any other name(s) which is (are) necessary for us to know in order for us to verify your employment or educational record?  Yes  No

If yes, please list \_\_\_\_\_

Are you at least 16 years of age?  Yes  No

To comply with federal law and the Federal Immigration and Control Act , CEC Entertainment Inc. ("CEC" or the "Company") requires all new hires to show proof of their eligibility to work in the United States. Failure to produce the required documents will cause CEC to withdraw its job offer and terminate an individual's employment.

If hired, can you present evidence of your US Citizenship or proof of your legal right to work in the US?  Yes  No

Have you ever filed an application with our Company before?  Yes  No

If yes, give dates and locations: \_\_\_\_\_

Have you previously worked for or applied for a position with our Company, in any of our locations either as an employee or through an employment agency?  Yes  No

If yes, give dates and locations: \_\_\_\_\_

Can you perform the essential functions of the job for which you have applied with or without reasonable accommodations?  Yes  No

How did you hear about the CEC? \_\_\_\_\_

Do you have any relatives now employed at the CEC ?  Yes  No

If yes, state name(s) and where they are located. \_\_\_\_\_

### RECORD OF EDUCATION

High School name and location: \_\_\_\_\_

Number of years attended: \_\_\_\_\_

Graduated?  Yes  No  GED

College name and location: \_\_\_\_\_

Number of years attended: \_\_\_\_\_

Graduated?  Yes  No

Other name and location: \_\_\_\_\_

### AVAILABILITY

Total Hours available per week: \_\_\_\_\_

Hours available

Monday From \_\_\_\_\_ to \_\_\_\_\_

Tuesday From \_\_\_\_\_ to \_\_\_\_\_

Wednesday From \_\_\_\_\_ to \_\_\_\_\_

Thursday From \_\_\_\_\_ to \_\_\_\_\_

Friday From \_\_\_\_\_ to \_\_\_\_\_

Saturday From \_\_\_\_\_ to \_\_\_\_\_

Sunday From \_\_\_\_\_ to \_\_\_\_\_

Do you have reliable transportation?  Yes  No

## EMPLOYMENT INQUIRIES

Please list **ALL** full-time and part-time jobs held by you in the last 10 years. You may provide information about volunteer experiences. If you require additional space, please attach page(s). Begin with present or most recent employer and account for all periods of unemployment  
**\*\* THIS SECTION MUST BE COMPLETED IN FULL. ("SEE RESUME") WILL NOT CONSTITUTE COMPLETION.**

### WORK HISTORY

Employer's Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ St: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Dates of employment: From: \_\_\_\_\_ to: \_\_\_\_\_  
Name of Supervisor: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Position: \_\_\_\_\_ Duties: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
Hourly pay: Starting: \$ \_\_\_\_\_ Finish: \$ \_\_\_\_\_

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Dates of employment: From: \_\_\_\_\_ to: \_\_\_\_\_  
Name of Supervisor: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Position: \_\_\_\_\_ Duties: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
Hourly pay: Starting: \$ \_\_\_\_\_ Finish: \$ \_\_\_\_\_

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City: \_\_\_\_\_ St: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Dates of employment: From: \_\_\_\_\_ to: \_\_\_\_\_  
Name of Supervisor: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Position: \_\_\_\_\_ Duties: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
Hourly pay: Starting: \$ \_\_\_\_\_ Finish: \$ \_\_\_\_\_

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City: \_\_\_\_\_ St: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Dates of employment: From: \_\_\_\_\_ to: \_\_\_\_\_  
Name of Supervisor: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Position: \_\_\_\_\_ Duties: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
Hourly pay: Starting: \$ \_\_\_\_\_ Finish: \$ \_\_\_\_\_

Have you ever been terminated from employment?

Yes  No

If yes, please explain \_\_\_\_\_

May we contact the employers listed in work history section?

Yes  No

If not, indicate which one(s) you do not wish us to contact \_\_\_\_\_

### **References other than relatives: (i.e. school counselor, previous employer, etc)**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

**ACKNOWLEDGEMENT**

I certify that all information which I have provided in this Application for Employment is true, correct and complete. I understand that deliberate falsifications or omissions will be grounds for denying or terminating employment with CEC Entertainment, Inc., d/b/a Chuck E. Cheese's, even if the determination is made years later.

I authorize investigation of any and all statements contained in this application for my employment as may be necessary in arriving at an employment decision. CEC Entertainment Inc., d/b/a Chuck E. Cheese's may seek to verify the information provided in this Application for Employment. By signing below, I authorize CEC Entertainment, Inc., d/b/a Chuck E. Cheese's, its parent, subsidiaries, affiliates and of its (their) employees or agents (collectively) referred to as CEC Entertainment, Inc., d/b/a Chuck E. Cheese's) to contact the persons, organizations, and personal references that I have listed and to discuss my character, general reputation and general background with them at anytime during the seeking of a position with CEC or at anytime during the course of my employment in accordance with local, state, or federal law.

I also release CEC Entertainment, Inc., d/b/a Chuck E. Cheese's, and all of the persons, organizations and their agents who are contacted by CEC Entertainment, Inc., d/b/a Chuck E. Cheese's for this purpose, from any and all claims, of any kind or nature, which may arise now or in the future from or in any way connected with the process of verifying the information I have provided.

I agree that, if I am employed, I will abide by all the rules and regulations of CEC including the safety rules of CEC. I understand that the pre-employment background check and taking of drug and/or alcohol tests, when given pursuant to company policy and in compliance with state and federal law, are a condition of continued employment and refusal to take such tests when asked will be grounds for my immediate termination. I further understand that nobody at CEC is authorized to enter into any written or verbal employment contracts with me for any definite period of time without the express written consent of the President/CEO of CEC. I also understand that my employment is "at-will" and may be terminated by myself or by CEC at any time for any reason or no reason at all, consistent with State and federal law with or without prior notice. I further agree and understand that it is my obligation to update and supplement any answers to the questions in this job application in the future, including in the interview process or when I become employed by CEC.

**Applicant's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**CHUCK E. CHEESE'S.**