

# GYMNASTICS UNLIMITED

Employment Application



APPLICANT INFORMATION															
Last Name				First				M.I.		Date					
Street Address						Apartment/Unit #									
City				State				ZIP							
Phone				E-mail Address											
Date Available								Desired Salary							
Position Applied for															
Availability		Mon:		Tue:		Wed:		Thur:		Fri:		Sat:		Sun:	
Are you a citizen of the United States?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If no, are you authorized to work in the U.S.?				YES <input type="checkbox"/>		NO <input type="checkbox"/>		
Have you ever worked for this company?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If so, when?								
Have you ever been convicted of a felony?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If yes, explain								
EDUCATION															
High School				Address											
Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree									
College				Address											
Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree									
Other				Address											
Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree									
REFERENCES															
<i>Please list three professional references.</i>															
Full Name				Relationship											
Company				Phone											
Address															
Full Name				Relationship											
Company				Phone											
Address															
Full Name				Relationship											
Company				Phone											
Address															

<b>PREVIOUS EMPLOYMENT</b>			
Company		Phone	
Address		Supervisor	
Job Title			
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title			
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title			
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/>			

<b>MILITARY SERVICE</b>	
Branch	From                  To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

<b>DISCLAIMER AND SIGNATURE</b>	
<p>I certify that all information provided on this application is true and correct. I understand that, if hired, discovery of falsified information on this application is grounds for dismissal. I understand that, if hired, my employment with Gymnastics Unlimited is for an undefined period and may be terminated at anytime, at the will of Gymnastics Unlimited or myself – for any reason or for no reason at all.</p> <p>I authorize the investigation/verification of all information I've provided on this application. I release Gymnastics Unlimited and any other previous employers, schools, and person who communicate with Gymnastics Unlimited from any liability that may result in seeking or releasing information. Gymnastics Unlimited will also conduct a background investigation and will require you to be finger printed through LiveScan©.</p> <p>If hired by Gymnastics Unlimited, I agree to abide by all policies and rules of the company, including, but not limited to, policies regarding uniforms and job-related personal appearance and grooming standards. I understand that these policies may be changed at any time.</p>	
Signature	Date