Employment Application

Equal opportunity employer

		Applican	t Information		
Full Name:			Date:		
	Last	First	М.І.		
Address:	Street Address			A = 0 stars 0 set // Lo : t - th	
	Street Address	-		Apartment/Unit #	
	City	411	State	ZIP Code	
	Oity			Zii Gode	
Phone:			Email	and the same of th	
Date Availa	ble: Desir	red Salary:		ANA	
Position App	plied for:				
Are you 18	years of age or older?	YES NO	Are you a citizen of the United	YES NO States?	
Have you e	ver worked for this company?	YES NO	If yes, when?		
Have you e	ver been convicted of a felony?	YES NO			
If yes, expla	ain:				
				1 7 7	
100		Available	Work Hours		
Monday	Tuesday Wedr			Saturday Sunday	
Start:					
End:				Cy	
Total hours	requested		MEAN		
Are you intere Birthday Partio	ested in working weekend es?	YES NO			
Are you intere camps?	ested in working Seasonal	YES NO			
Are you intere Gyms?	ested in working weekend Open	YES NO			

	Why	do you want to work at	Journey	Gymnastics?	
		Education	on		
High School: _		Address:	200		
From:	To:		ES NO	Diploma::	
College:		Address:	BO	2 2 1	
From:	То:		ES NO	Degree:	27
Other:	9	Address:			
From:	To:	Ye Did you graduate?	ES NO	Degree:	
	277	Reference	200		
6 6		Kelelelic	1		10:01
Please list three	professional refe	rences.	CA.		
ull Name:				Relationship:	
Company:			- 4	Phone:	
Address:					
ull Name:				Relationship:	
Company:				Phone:	
Address:			na é	70.0	7
-ull Name:		CALL.		Relationship:	
Company:				Phone:	
Address:					

		Previous Er	прюушет			
A dalagoo.				Phone:Supervisor:		
Job Title:	: Starting Salary:			Ending Salary:\$		
Responsibilities:						
From:	To:		Reason for Leaving			
May we contact your po	revious supervisor fo	or a reference?	YES NO	AN A		
Company:			V	Phone:		
Address:	7/			Supervisor:		
Job Title:		Starting Sa	alary:	Ending Salary: \$		
Responsibilities:						
From:	To:		Reason for Leaving			
May we contact your pr	revious supervisor fo	or a reference?	YES NO			
R						
Company:				Phone:		
Address:				_ Supervisor:		
Job Title:		Starting Sa	alary: <u>\$</u>	Ending Salary: <u>\$</u>		
Responsibilities:			AL CAL			
From:	To:		Reason for Leaving			
May we contact your p	revious supervisor fo	or a reference?	YES NO			
		Disclaimer ar	nd Signature			
I certify that my answe	ers are true and cor					
If this application lead interview may result ir		understand that	false or misleading	information in my application or		
Signature:				Date:		

	Owner/Management interview comments	
Date interviewed	Signature:	
		The state of
Name:	Comments from References'	
Traine.		
	DAY.	
Date Contacted	Signature	
	Comments from References'	
Name:	1: A./	P
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		A SAM
Date Contacted	Signature	
Date Contacted	Signature	
200	Comments from References'	Allen
Name:	Comments from References	
		7
Date Contacted	Signature	