

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address:		
Street Address		Apartment/Unit #
City	State	ZIP Code

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Date available to start and/or end: \_\_\_\_\_

Compensation: \$13/hr. Raises with exceptional work and/or certifications, education, qualifications related to fitness or wellness. Membership is free when working 30+ hrs/month.

Shift:	Monday	Tuesday	Wednesday	Thursday	Friday
5:30-8am					
1-5pm					

Shift:	Saturday
8am-12pm	

If yes, explain: \_\_\_\_\_

Other  
Education: \_\_\_\_\_ What years: \_\_\_\_\_ Did you graduate: Y N

# Employment Application



## References

*Please list a professional reference.*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

## Previous Employment

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? ☐ YES ☐ NO

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? ☐ YES ☐ NO

## Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge.*

*If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_