

Legacy Gymnastics Center

EMPLOYMENT APPLICATION

Application information

Full name:				Date:	
	Last	First	M.I.		
Address:				Phone:	
	Street addr	ess	Apt/Unit #		
				Email:	
	City	State	Zip Code		
Date Available to Start:			/TH/F/S u are available)	Desired Hourly rate:	\$
Position applied	for:				
Are you a citizen	of the United States?	Yes □ No □			
16					
If no, are you au	thorized to work in the U.S.?	Yes □ No □			
Have you ever be	een convicted of a felony?	Yes □ No □	If yes, explain?	?	_
Education					
High school:		Address:			
From:	To:	Did you graduate	e? Yes □ No	☐ Diploma:	
College:		Address:			
From:	То:	Did you graduate	e? Yes □ No	□ Degree:	
Other:		Address:			
From:	То:	Did you graduate	e? Yes □ No	□ Degree:	

References

Please list two professional references.

Full name:	Relationship:		
Company:	Phone:		
Address:	Email:		
Full name:	Relationship:		
Company:	Phone:		
Address:	Email:		
Previous Employment			
Company:	Phone:		
Address:	Supervisor:		
Job title:	From:		To:
Responsibilities:			
May we contact your previous supervisor for a reference?	Yes □	No □	
Company:	Phone:		
Address:	Supervisor:		
Job title:	From:		To:
Responsibilities:			
May we contact your previous supervisor for a reference?	Yes □	No □	
Company:	Phone:		
Address:	Supervisor:		
Job title:	From:		То:
Responsibilities:			
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	e. If this applicatio	n leads to employr	ment, I understand
that false or misleading information in my application or interview may result	t in my release.		
Signature:		Date:	