

# PARAGON GYM FOR KIDS

4175 Plank Rd, Fredericksburg, VA 22407  
540-548-4966

## Employment Application

### Applicant Information

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

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*  
\_\_\_\_\_  
*City State ZIP Code*

Phone: ( )

E-mail Address:

Date Available:

Are you at least 18 yrs old? YES NO

Position Applied for:

Desired Salary: \$

Gymnastics experience? YES NO

Are you a citizen of the United States?

YES NO

If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this company?

YES NO

If yes, when?

Have you ever been convicted of a felony?

YES NO

If yes, explain:

Do you have charges or prosecutions that are pending? YES NO

If yes, please explain:

Have you ever been fired from a job, asked to leave or resign? YES NO

If yes, please explain:

Do you any relatives currently employed by this organization? YES NO

If yes, please list their name(s)

### Education

High School:

Address:

From: To: Did you graduate? YES NO Degree :

College:

Address:

From: To: Did you graduate? YES NO Degree :

Other:

Address:

From: To: Did you graduate? YES NO Degree :

### References

*Please list three references that are not relatives or supervisors.*

Full Name: Relationship:

Company: Phone: ( )

Address:

Full Name: Relationship:

Company: Phone: ( )

Address:

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Full Name:

Relationship:

Company:

Phone: (    )

Address:

**Previous Employment (Complete even if you have a resume to attach) List your most recent employment first.**

Company:

Phone: (    )  
Supervisor

Address:

:

Job Title:

Starting Salary: \$

Ending Salary: \$

Responsibilities:

From:

To:

Reason for Leaving:

May we contact your previous supervisor for a reference?

YES

NO

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Company:

Phone: (    )  
Supervisor

Address:

:

Job Title:

Starting Salary: \$

Ending Salary: \$

Responsibilities:

From:

To:

Reason for Leaving:

May we contact your previous supervisor for a reference?

YES

NO

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Company:

Phone: (    )  
Supervisor

Address:

:

Job Title:

Starting Salary: \$

Ending Salary: \$

Responsibilities:

From:

To:

Reason for Leaving:

May we contact your previous supervisor for a reference?

YES

NO

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**Military Service**

Branch:

From:

To:

Rank at Discharge:

Type of Discharge:

If other than honorable, explain:

**Disclaimer and Signature**

*AFFIDAVIT, CONSENT AND RELEASE*

**PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING**

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements. A copy of this Affidavit signed by me can be used as my authorization for release of information from my former employers, schools or persons named in this application.

I understand I may be required to successfully pass a drug screening examination. I hereby consent to a pre- and/or post-employment drug screen as a condition of employment, if required.

**I UNDERSTAND THAT THIS APPLICATION, VERBAL STATEMENTS BY MANAGEMENT, OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESSED OR IMPLIED CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE.**

I have read, understand and, by my signature, consent to these statements.

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

***For HR use only:***

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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