

APPLICATION FOR EMPLOYMENT

Please provide complete and legible information. An incomplete application may affect your consideration for employment.

Gym Skills, is committed to a policy of Equal Employment Opportunity and will not discriminate against an applicant or employee on the basis of race, color, religion, creed, national origin or ancestry, sex, age, physical or mental disability, veteran or military status, genetic information, sexual orientation, marital status, or any other legally recognized protected basis under federal, state or local laws, regulations or ordinances. The information collected by this application is solely to determine suitability for employment, verify identity and maintain employment statistics on applicants.

Applicants with disabilities may be entitled to reasonable accommodation under the terms of the Americans with Disabilities Act and certain state or local laws. A reasonable accommodation is a change in the way things are normally done which will ensure an equal employment opportunity without imposing undue hardship on Gym Skills. Please inform the company's personnel representative if you need assistance completing any forms or to otherwise participate in the application process.

Your application will be active for 60 days. If you are not hired during that time period, but wish to continue to be considered for available positions, you must complete a new application.

GENERAL INFORMATION

Full Name				Date	
_	FIRST	MIDDLE	LAST		
Address					
	STREET		CITY	STATE	ZIP CODE
Contact Nun	ber ()	D	Date available for work		
Alternate Co	ntact Number ()	E-mail (optional)		
Do you now,	or will you in the	ork in the United States? future, require immigrati quired consistent with fea	ion sponsorship for work au	thorization (e.g., H	I-1B)? 🗆 Yes 🗆 No
	ast 18 years old? ay be required to p	provide authorization to v	□ Yes □ No work.)		
How were ye	ou referred to Gym	Skills?			

POSITION INFORMATION

Type of work desired?		 Salary range expected (required)		
Applying for:	□ Full-time	Part-time		Seasonal

EDUCATION

Type of School	School Name and Location	Highest Grade Completed	Grade Point Average	Course of Study or Major
High School or G.E.D. equivalent		9 10 11 12/GED		
College or University		1 2 3 4		
Vocational or Trade School				
Graduate School				
Other (including military training)				
List any work related certifications or licenses you currently possess.				

BACKGROUND INFORMATION

During the past seven years, have you ever been	n discharged, suspended or asked to resign from any position?
\Box Yes \Box No If yes, please explain.	
For the purpose of verifying information on this	s application, have you ever worked or attended school under a different name at any of
the organizations you have listed?	□ Yes □ NoIf yes, specify name.

PROFESSIONAL REFERENCES

List three professional references (other than those listed as current/former supervisor) that we may contact:			
Name	Telephone No. ()		
E-mail Address	Type of Acquaintance		
Name	Telephone No. ()		
E-mail Address	Type of Acquaintance		
Name	Telephone No. ()		
E-mail Address	Type of Acquaintance		

EMPLOYMENT RECORD

List all employment experience for the past seven years, starting with the most recent or present employer, including US Military Service. Using a separate section for each position, describe in detail all work experience including periods of unemployment. You may include as part of your employment history any verified work performed on a volunteer basis. Resumes may not be substituted in lieu of completing the following employment information.

Current Employer	Phone ()
Geographic Location	From Month Year
Your Position	Month Year
Supervisor's Name/Title	To Month Year
May we contact? Yes No Primary responsibilities	Reason for Leaving
Employer	Phone ()
Geographic Location	From Month Year
Your Position	Month Year
Supervisor's Name/Title	То
	To Month Year
Primary responsibilities	Reason for Leaving
Employer	Phone ()
Geographic Location	From Month Year
Your Position	Month Year
Supervisor's Name/Title	То
	To Month Year
Primary responsibilities	Reason for Leaving
Employer	Phone ()
Geographic Location	From Month Year
Your Position	ivionui iou
Supervisor's Name/Title	To
	Month Year

Primary responsibilities	Reason for Leaving
Have you worked for any Gym Skills retail store before?	

□ Yes □ No If yes, at what location? _____ Job title: _____

Have you signed or otherwise agreed to any non-solicitation, non-competition or other similar agreement with any prior employer? \Box Yes \Box No If yes, explain: _____

Please account for any gaps of employment.

ADDITIONAL COMMENTS

Please comment on how your prior education and experiences qualify you for the type of employment you are seeking. Detail any past responsibilities and achievements. Note any special coursework, honors, activities, special projects or any other information that will assist us in considering your application for employment.

Other Comments.

PLEASE READ CAREFULLY AND INITIAL EACH PARAGRAPH BEFORE SIGNING

I have disclosed all information that is relevant and should be considered applicable to my candidacy for employment.
Initials
I understand, where permissible under applicable state and local law, I may be subject to a pre-employment background check after receiving a conditional offer of employment to investigate my criminal background, driving record, credit history, and other matters related to my suitability for employment. I understand that a separate disclosure and consent form will be provided to me prior to any background check.
Initials
I hereby certify that the information given by me is true in all respects. I authorize Gym Skills, and its representatives to contact my prior employers and all others (with the exception of my current employer, only if I have marked "May we contact?" on this application as "No") for the purpose of verification of the information I have supplied and release same from any liability resulting from the information released. I authorize employers, schools and other persons named on this application to provide any information or transcripts requested.
I understand employment with Gym Skills, is also contingent on my providing sufficient documentation necessary to establish my identity and eligibility to work in the United States.
Initials
I hereby certify that, if employed, my employment with Gym Skills, will not conflict with, or result in the violation of, breach of, or default under, any contract, agreement or understanding that I am a party to or am bound by, other than those I have disclosed in this application, if any.
Initials]
I hereby certify that, if employed, my employment with Gym Skills, will not violate any non-solicitation, non-competition or other similar covenant or agreement I have with any of my prior employers, other than those I have disclosed in this application, if any.
Initials]
I hereby certify that, if employed, I will report to my supervisor, a representative of HR or other member of management, if I am ever harassed by someone in the company or if I ever become aware of any unethical behavior by any employee.
Initials]
I expressly understand and agree that, if employed, my employment, having no specified term, is based upon mutual consent and may be terminated at will, with or without cause, by either party (Gym Skills, or me) without prior notice to the other, unless otherwise prohibited by law.
Initials
I understand that no representation, whether oral or written, by any representative or agent of Gym Skills, at any time, can constitute an implied or express contract of employment. I further understand no representative or agent of Gym Skills, has the authority to enter into an agreement for employment for any specified period of time or to make any change in any policy, procedure, benefit or other terms or condition of employment other than in a document signed by the Director of Human Resources or an authorized representative.
Initials
I certify that all of the above information is true and complete, and I understand that any falsification or omission of information may disqualify you from further consideration for employment or, if hired, may result in termination regardless of the time elapsed before discovery.
Note: An offer of employment is conditioned upon complying with Gym Skills requirements including, but not limited to, signing a separate disclosure and consent form prior to any background investigation.
MY SIGNATURE IS EVIDENCE THAT I HAVE READ AND AGREE WITH THE ABOVE STATEMENTS.
Applicant's signature Date