

## **Gym406 Job Application**

Name	First Name:	First Name:		
Local Address	Street: City:	State:	ZIP Code:	
Phone	Home:		Cell:	
Email	Personal Emo	ıil Address:		
Position			Available Star	rt Date:
Desired Pay			Currently Employed: Y / N	
Education	Name & Location	Graduation Date	Degree	Major/ Subject Studied
High School				
College				
Specialized Training				
Other Education				
Awards, Honor	s, or Special Ac	hievements		
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## **Previous Employment Experience**

Position	Dates of Employment	Job Description and Duties	Reason for Leaving

## References - Please add at least 2 references, other than relatives.

Name	Relationship	
Address		
City	State	ZIP
Phone	Email	

Name	Relationship	
Address		
City	State	ZIP
Phone	Email	

## Days & Hours Available

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Please provide any other pertinent information	on to be considered.
Certification I certify the information provided on this application understand that by providing false or misleading rejection of my Application, or if employment of authorize Gym406 to contact former employer egarding my employment and education. I authorize ducational organizations to fully and freely comprevious employment and education. I authorize references to fully and freely communicate infemployment and education.	ng information will be the basis for commences immediate termination.  ers and educational organizations athorize my former employers and ommunicate information regarding my ze those persons designated as
If an employment relationship is created, I und specific written contract of employment signe Director, the employment relationship will be ewords, with appropriate notice, I will have the feemployment relationship when I choose for recemployer would have the same right. Moreove employee of Helena Kidsports Gymnastics, excemployment signed on behalf of the organizate alter or vary the voluntary nature of the emplo	d on behalf of the organization by its intirely voluntary in nature. In other all and complete discretion to end the asons of my choice. Similarly, my er, no agent, representative or cept in a specific written contract of cion and its Director, has the power to
I have carefully read the above certification of	and I understand and agree to its
terms.	
Applicant Signature	Date