

# TREVINO'S GYMNASTIC SCHOOL

## JOB APPLICATION

**INSTRUCTIONS:** Please provide the information requested below as it applies to you at this time. If you need more space to provide the information, or would like to explain any answer you give, and need more space to do so, feel free to ask for additional paper. If you need help in filling out any part of this application ask for help and it will be provided for you.

*THIS COMPANY IS AN EQUAL OPPORTUNITY EMPLOYER. WE DO NOT DISCRIMINATE ON THE BASIS OF RACE, RELIGION, NATIONAL ORIGIN, SEX, AGE, OR DISABILITY.*

### PERSONAL INFORMATION

DRIVERS LICENSE # \_\_\_\_\_ DATE \_\_\_\_\_

NAME \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_  
LAST FIRST MIDDLE

ADDRESS \_\_\_\_\_  
STREET CITY STATE ZIP

PHONE # \_\_\_\_\_ CELL # \_\_\_\_\_ BIRTH DATE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

Are you either a U.S. Citizen or an alien authorized to work in the United States? (Circle One) YES NO

### EMPLOYMENT DESIRED

POSITION \_\_\_\_\_ DATE YOU CAN START \_\_\_\_\_ SALARY DESIRED \_\_\_\_\_

CURRENTLY EMPLOYED? \_\_\_\_\_ MAY WE CONTACT PRESENT WHERE? \_\_\_\_\_ EMPLOYER ? \_\_\_\_\_

REFERRED BY: \_\_\_\_\_

### GENERAL INFORMATION

LIST ANY GYMNASTICS EXPERIENCE, SPECIAL STUDIES, EXPERIENCE:

\*THE AGE DISCRIMINATION IN EMPLOYMENT ACT OF 1987 prohibits discrimination on the basis of age with respect

**FORMER EMPLOYEES** (List below last three employers starting with the last one first)

| DATE       | NAME AND ADDRESS OF EMPLOYER | PHONE # | SALARY | REASON FOR LEAVING |
|------------|------------------------------|---------|--------|--------------------|
| FROM<br>TO |                              |         |        |                    |
| FROM<br>TO |                              |         |        |                    |
| FROM<br>TO |                              |         |        |                    |

**REFERENCES:** Give the names of three persons **not relatives** that you have know at least two years

| NAME | ADDRESS | BUSINESS | YEARS ACQUAINTED | PHONE |
|------|---------|----------|------------------|-------|
|------|---------|----------|------------------|-------|

|   |  |
|---|--|
| 1 |  |
| 2 |  |
| 3 |  |

**ACTIVITIES: (Civil, Athletics,etc.)** Exclude Organizations, the name of which indicates race, creed, sex, age, marital status, color or nation or origin of its members

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**IN CASE OF EMERGENCY NOTIFY:**

| NAME | ADDRESS | PHONE# |
|------|---------|--------|
|------|---------|--------|

**"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, and release all parties from all liability for any damage that may result from furnishing same to you. I understand and agree that, if hired my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice and without cause."**

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE