



FLIPS GYMNASTICS LLC

Employment Application

APPLICANT INFORMATION					
Last Name		First		M.I.	Date
Street Address				Apartment/Unit #	
City		State		ZIP	
Phone		E-mail Address			
Date Available		Social Security No.		Desired Salary	
Position Applied for					
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	
				YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for this company?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?	
Have you ever been convicted of a felony?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain	

EDUCATION					
High School			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

REFERENCES	
<i>Please list three professional references.</i>	
Full Name	Relationship
Company	Phone ()
Full Name	Relationship
Company	Phone ()
Full Name	Relationship
Company	Phone ()

PREVIOUS EMPLOYMENT

Company	Phone ()
---------	-----------

Address	Supervisor
---------	------------

Job Title	Starting Salary \$	Ending Salary \$
-----------	--------------------	------------------

Responsibilities

From	To	Reason for Leaving
------	----	--------------------

May we contact your previous supervisor for a reference? YES NO

Company	Phone ()
---------	-----------

Address	Supervisor
---------	------------

Job Title	Starting Salary \$	Ending Salary \$
-----------	--------------------	------------------

Responsibilities

From	To	Reason for Leaving
------	----	--------------------

May we contact your previous supervisor for a reference? YES NO

Company	Phone ()
---------	-----------

Address	Supervisor
---------	------------

Job Title	Starting Salary \$	Ending Salary \$
-----------	--------------------	------------------

Responsibilities

From	To	Reason for Leaving
------	----	--------------------

May we contact your previous supervisor for a reference? YES NO

SKILLS AND QUALIFICATIONS

Summarize any training, skills, licenses, and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying:

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature	Date
-----------	------