

DAVE'S GYMNASTICS FACTORY

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			

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 references.</i>	
Name	Relationship
Company	Phone ()
Address	
Name	Relationship
Company	Phone ()
Address	
Name	Relationship
Company	Phone ()
Address	

PREVIOUS EMPLOYMENT		
Company		Phone ()
Address		Supervisor
Job Title		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>		
Company		Phone ()
Address		Supervisor
Job Title		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>		

DISCLAIMER AND SIGNATURE	
<p>I certify that my answers are true and complete to the best of my knowledge.</p> <p>If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.</p>	
Signature	Date