

New Carlisle Sports & Fitness Club

General Employment Application

Date:		SEX	<input type="checkbox"/> FEMALE	<input type="checkbox"/> MALE
Name:	Address:			
City:	Zip Code:	Email:		
Home Phone:	Cell Phone:			
Position Applying For:				

Education	
High School:	Graduation year:
College:	Graduation year:
Other:	Graduation year:

Please list all previous experiences that help you qualify for the position of interest.

Information requested below is required to obtain a limited Criminal History Check

DATE OF BIRTH:	/ / (mm/day/year)
HAVE YOU EVER BEEN CONVICTED OF A FELONY?	<input type="checkbox"/> YES <input type="checkbox"/> NO
IF YES, PLEASE EXPLAIN	

Personal References	Job References:
Name: Phone:	Name: Phone:
Name: Phone:	Name: Phone:
Name: Phone:	Name: Phone:

Past Employment History	
Employer:	Dates worked:
Duties Performed:	
Reason for leaving:	
Employer:	Dates worked:
Duties Performed:	
Reason for leaving:	
Employer:	Dates worked:
Duties Performed:	
Reason for leaving:	

May we contact your previous employers for a job reference?	<input type="checkbox"/> yes <input type="checkbox"/> no
Signature: _____	

ALL EMPLOYEES WILL BE SUBJECT TO A DRUG TEST