

SIGNATURE

## 1982 W Grand River Ave, Ste 420 Okemos MI 48864 | (517) 643-3100 www.gymkindacademy.com

DATE

EMPLOYMENT APPLICATION						
APPLICANT INFORMATION						
LAST NAME			DATE OF APPLICATION			
FIRST NAME & MIDDLE INITIAL			ARE YOU 18 OR OLDER?	YES	NO	
STREET ADDRESS			PHONE			
CITY / STATE / ZIP CODE			EMAIL ADDRESS			
If selected for employment, are you willing to submit to a background check?				YES	NO	
Entitled to work in U.S.?	YES	NO	Date Available to Begin			
Position(s) Applying For			Desired Pay			
PREVIOUS EXPERIENCE						
EMPLOYER NAME 1			START DATE			
SUPERVISOR NAME			END DATE			
STREET ADDRESS			PHONE			
CITY / STATE / ZIP CODE			EMAIL ADDRESS			
POSITION HELD			RATE OF PAY			
Reason for leaving?			May we contact?	YES	NO	
EMPLOYER NAME 2			START DATE			
SUPERVISOR NAME			END DATE			
STREET ADDRESS			PHONE			
CITY / STATE / ZIP CODE			EMAIL ADDRESS			
POSITION HELD			RATE OF PAY			
Reason for leaving?			May we contact?	YES	NO	
EMPLOYER NAME 3			START DATE			
SUPERVISOR NAME			END DATE			
STREET ADDRESS			PHONE			
CITY / STATE / ZIP CODE			EMAIL ADDRESS			
POSITION HELD			RATE OF PAY			
Reason for leaving?			May we contact?	YES	NO	
PERSONAL REFERENCES						
FIRST & LAST NAME		PHONE NUMBER	HOW LONG KNOWN	RELATIONSHIP		
1						
2						
3						
EDUCATION						
nich school	NAME AND LOCATIO	DN .	LAST YEAR COMPLETED	MAJOR / EMPHA	ASIS & DEGREE EARNED	
HIGH SCHOOL						
COLLEGE / UNIVERSITY						
TRADE SCHOOL			OFDITIO (TIO) (A TIO)			
OTHER APPLICABLE TRAINING  APPLICABLE SKILLS /			CERTIFICATIONS HELD			
PROFICIENCIES  I certify that the information given or	n this application is cor	mplete and correct to the	best of my knowledge. I give co	onsent to contact fo	ormer employers/institutions list	ted