

H-Town Elite Gymnastics

EMPLOYMENT APPLICATION

*Please e-mail completed application to: contact@htownelite.com

Name: _____
First, Middle, Last

Present Address: _____

Permanent Address: _____

Telephone No.: _____

Email: _____

Position Applying For: _____

Preferred Start Date: _____ Full Time/Part Time: _____

Specific Days and Hours Available: _____

Have you previously applied to work at H-Town? _____

If yes, specific date and position sought: _____

Desired Salary: _____

Referred by: _____

Education: _____

Degree or certification obtained? _____

Are you at least 18 years of age? _____

Current Employer:

Position: _____

Supervisor: _____

Dates of Employment _____

Current Salary: _____

May we contact your current employer? _____



H-Town Elite Gymnastics is an Equal Opportunity Employer

Employment History: Starting with the most recent, please list the name, address, phone number of your former employers.

1. Employer: _____

Address: _____

Phone Number: _____

Email: _____

Dates of Employment: _____

Job Title: _____ Supervisor: _____

Duties Performed: _____

Reason for Leaving: _____

Salary: _____

Duties Performed: _____

Reason for Leaving: _____

2. Employer: _____

Address: _____

Phone Number: _____

Email: _____

Dates of Employment: _____

Job Title: _____ Supervisor: _____

Duties Performed: _____

Reason for Leaving: _____

Salary: _____

Duties Performed: _____

Reason for Leaving: _____



3. **Employer:** _____

Address: _____

Phone Number: _____

Email: _____

Dates of Employment: _____

Job Title: _____ Supervisor: _____

Duties Performed: _____

Reason for Leaving: _____

Salary: _____

Duties Performed: _____

Reason for Leaving: _____

4. **Employer:** _____

Address: _____

Phone Number: _____

Email: _____

Dates of Employment: _____

Job Title: _____ Supervisor: _____

Duties Performed: _____

Reason for Leaving: _____

Salary: _____

Duties Performed: _____

Reason for Leaving: _____



PLEASE READ CAREFULLY BEFORE SIGNING THIS APPLICATION

By signing my name below, I certify that the answers given in this application for employment are true and correct to the best of my knowledge. I authorize such inquiry into the statements made in this application as may be necessary in reaching an employment decision. I understand that any false or misleading information given in this application or during a pre-employment interview, including a failure to disclose requested information, may result in my discharge.

I understand that I will be required to pass a background check, before a final offer of employment is made. By signing my name below, I consent to these procedures.

I understand that any employment relationship with this employer is “at will,” which means that the employee may resign at any time and the employer may discharge the employee at any time, with or without cause. I also understand that this at-will employment relationship may not be changed by any written document or by any behavior, unless the change is specifically acknowledged in writing by H-Town Elite Gymnastics’ Chief Compliance Officer.

I hereby acknowledge that I have read, understand and agree to the preceding statements.

Signature

Date

