## Application for United Gymnastics Academy 722 Center Road Frankfort, Illinois 60423



Name

Address

		POSITION APP	LYING FOR:						
			APPLICANT TELEPHONE:						
V.			EMAIL ADDRESS:						
AWKFORT, ILL			SHIRT SIZE:						
YOUR NAME:									
Last First		First	Middle						
DATE OF BIRTH:			SSN:						
ADDRESS:			ARE YOU LEGA	ALLY ELIGII	BLE FOR EM	IPLOYMENT	IN THE U.S.A.?		
			Yes	□ No	o (If yes,	verification v	will be required.)		
			I AM SEEKING A PERMENENT POSITION: Yes No						
When are you ava	ilable to work?								
Hours	Monday	Tuesday	Wednesday	Thurso	day Fr	iday	Saturday		
Available									
Have you ever be	en convicted of a fe	elony?	Yes	No					
Are you able to perform the essential functions of the position with or without accommodations?  Yes  No									
What location are	you applying for?		Tinley	Frankfor	t Eith	er			
IF NECESSARY F	OR THE JOB, ARI	E YOU OVER (pleas	se mark one) 18_	_1921	_				
I WILL BE ABLE	TO REPORT TO W	ORK DAYS A	AFTER BEING NOTI	FIED THAT	I AM HIRED				
EDUCATION:					Yrs. Completed	Major	Graduate or degree		
High School:									
College/University	:								
Business/Technica	al:								
Other (May include	e grammar school)								
			l						
MILITARY SERVI		es	No						
Duty/Specialized	Fraining:								
REFERENCES: L	ist two personal ref	erences who are no	t relatives or former s	upervisors.					

Telephone

Occupation

Years known

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Name	Address		Telephone	Occupation	Years known
EMPLOYMENT:	List last employr to this job are lis	ment first. Include summe sted here, in the summary	r or temporary jobs. (following this secti	Be sure all your experience ion), or use an extra she	ence or employers related et of paper if necessary.
Employer Name an	nd Address	Position Title/Duties S	kills		Dates Employed from to  Reason for leaving
		Supervisor's Name:		Telephone:	
Employer Name an	nd Address	Position Title/Duties S	ikills		Dates Employed from to  Reason for leaving
		Supervisor's Name:		Telephone:	
Employer Name an	nd Address	Position Title/Duties S	kills		Dates Employed from to  Reason for leaving
		Supervisor's Name:		Telephone:	
Summarize other employment related	d to this job:				
Types of computers equipment that you Typing speed:	ı are qualified to op	or mechanical erate or repair:			
		or Registrations:			
		skills, other languages, or vish to bring to the employ			

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Daytime phone:
Relationship:
your employment application, your personal and employment facts on this application, and are subsequently hired, you with your company, I agree to conform to the rules and dbook and acknowledge that these rules and regulations er at any time, at the employer's sole option and without any imployer, my employment will be at will, and may be
Date:

**Equal Employment Opportunity:** While many employers are required by federal law to have an Affirmative Action Program, all employers are required to provide equal employment opportunity and may ask your national origin, race and sex for planning and reporting purposes only. This information is optional and failure to provide it will have no affect on your application for employment.

**Employers Notes:**