

## **EMPLOYMENT APPLICATION**

| Thank you for your interest in the Southern Prairie Family Fitness Center.  |                     |           |
|---|---------------------|-----------|
| The SPFFC is an equal opportunity employer and does not discriminate in recruitment, hiring or other terms or conditions of employment on the basis of race, color, religion, national origin, sex, disability, age or any other status protected by law.  If you would like to apply to join the SPFFC staff team, please complete the application below.  Be sure to write legibly The application must be completed in full. Do not leave any spaces blank or write "see resume" in response to any question. Read and sign the last page of the application.  |                     |           |
| Personal Information  |                     |           |
| Position Applying For: Date:  |                     |           |
| Preferred Area Of Work: Date Available:   |                     |           |
| NAME:E-mail:  |                     |           |
| Last First MI   |                     |           |
| Address:         Street         City         State         ZIP           Telephone: Home        /   |                     |           |
| Are you 18 years of age or older? (If not, you may be required to provide work authorization.)  |                     | Yes       |
|   |                     | No        |
| If hired, can you provide verification of your legal right to work in the United States?  |                     | Yes       |
| Can you perform the essential functions of the job for which you are applying, with or without reasonable   |                     | No<br>Yes |
| accommodation?  |                     | No        |
| Have you ever been convicted of a crime, pled no contest, or had adjudication withheld? If yes, please provide a date, location, charges and a complete explanation of all offenses. (A conviction will not necessarily bar employment. The   | П                   | Yes       |
| SPFFC may consider the nature, date and circumstances of the offenses.)   |                     | No        |
|   |                     |           |
| Notice to All Applicants: The SPFFC enforces its policies and practices to prevent child abuse.  Allegations or suspicions of child abuse are taken very seriously at the SPFFC and will be reported to the proper authoritie investigation. We have abuse reporting procedures, there are unscheduled visits from supervisors, we have an open door for we have a code of conduct for staff. We minimize opportunities for abuse to occur and we talk with children about personal sat touching limits. We also screen carefully to prevent abusers from being hired and we provide child abuse prevention training to | parents<br>fety and |           |
|   |                     |           |

| Ε                    | mployment In  | formation           |                     |                |  |          |                     |          |
|----------------------|---|---------------------|---------------------|----------------|--|----------|---------------------|----------|
|                      | List available days/l   | nours:              |                     |                |  |          |                     |          |
|                      | Sunday  | Monday              | Tuesday             | Wednesday      | Thursday   | у        | Friday              | Saturday |
|                      |   |                     |                     |                |  |          |                     |          |
|                      |   |                     |                     |                |  |          |                     |          |
| Pı                   | Preferred Job Status:   Part-time   Seasonal   As Needed  |                     |                     |                |  |          |                     |          |
| Н                    | ave you previously  | been employed by    | this SPFFC or any o | ther SPFFC?    |  |          | □ Yes               | □ No     |
|                      | If yes, when? At which locations?   |                     |                     |                |  |          |                     |          |
| Н                    | Have you previously volunteered at this SPFFC or any other SPFFC?   |                     |                     |                |  | □ No     |                     |          |
|                      | If yes, when? At wh   | ich locations?      |                     |                |  |          |                     |          |
| D                    | o you have any rela   | itives or household | d members currently | working for th | is SPFFC?  |          | □ Yes               | □ No     |
|                      | If yes, name(s) and   | d relationship:     |                     |                |  |          |                     |          |
|                      | ow did you hear abo   |                     |                     |                | <ul><li>□ SPFFC staff</li><li>□ School</li></ul> | referral | ☐ SPFFC n☐ Advertis |          |
|                      |   |                     |                     |                | □ Walk-in  |          | □ Other             |          |
|                      |   |                     |                     |                | □ SPFFC webs                                     | ite      |                     |          |
|                      |   |                     |                     |                |  |          |                     |          |
| -                    | ducation & Tra  | aining              |                     |                |  |          |                     |          |
|                      | ducation & Tre  | anning              |                     |                |  |          |                     |          |
|                      | Educational E   | Background          |                     |                |  |          |                     |          |
|                      |   | Name of School      | City, State         | Diplo          | oma Awarded                                      | Degree   | Major               |          |
|                      |   |                     |                     |                |  |          |                     |          |
|                      | ☐ High School<br>☐ GED  |                     |                     | □ <b>Y</b>     |  |          |                     |          |
|                      | □ GED   |                     |                     |                | o<br>n Progress                                  |          |                     |          |
|                      | College   |                     |                     |                | es   |          |                     |          |
|                      |   |                     |                     | □ I            | n Progress                                       |          |                     |          |
|                      | Graduate<br>School  |                     |                     |                | es<br>o<br>n Progress                            |          |                     |          |
|                      |   |                     |                     | -              |  |          |                     |          |
| Vocational/<br>Other |   |                     |                     | _ Y            | es   |          |                     |          |
|                      |   |                     |                     |                | o<br>n Progress                                  |          |                     |          |
|                      | Describe any non-employment experience such as school or volunteer activities that might strengthen your application: |                     |                     |                |  | cation:  |                     |          |
|                      |   |                     |                     |                |  |          |                     |          |
|                      |   |                     |                     |                |  |          |                     |          |
|                      |   |                     |                     |                |  |          |                     |          |
|                      | Safety & Job Specific Certifications  |                     |                     |                |  |          |                     |          |
|                      | Type (CPR, First A  |                     | Provider            |                | Level  |          | Expiration          | ı        |
|                      |   |                     |                     |                |  |          |                     |          |
|                      |   |                     |                     |                |  |          |                     |          |
|                      |   |                     |                     |                |  |          |                     |          |

| List all previous employ Employment History recent. Use additional s |                                       | even years starting with the most                                    |
|--|---------------------------------------|--|
| Employer Telephone /   | <u>Dates Employed</u><br>From:/       | Summarize the nature of the work performed and job responsibilities. |
| Employer ,   | To: /                                 | por service and job responsibilities.                                |
| Address  |                                       |  |
| Job Title  | <u>Starting</u> Hourly<br>Rate/Salary |  |
| Immediate Supervisor and Title                                       | \$ per                                | _  |
|  | <u>Ending</u> Hourly<br>Rate/Salary   |  |
| Reason for Leaving   | \$ per                                |  |
| May we contact this employer?  | Dates Employed                        | Summarize the nature of the work                                     |
| Employer /   | From:/                                | performed and job responsibilities.                                  |
| Address  | To:/                                  |  |
| Job Title  | <u>Starting</u> Hourly<br>Rate/Salary |  |
| Immediate Supervisor and Title                                       | \$ per                                |  |
| Annicalate Supervisor and Title                                      | Ending Hourly<br>Rate/Salary          |  |
| Reason for Leaving   | \$ per                                |  |
| May we contact this employer? ☐ Yes ☐ No                             | ' ——— ' ————                          |  |
| Telephone /  | <u>Dates Employed</u><br>From:/       | Summarize the nature of the work performed and job responsibilities. |
| Address  | To:/                                  |  |
| Job Title  | <u>Starting</u> Hourly<br>Rate/Salary | -  |
|  | \$ per                                |  |
| Immediate Supervisor and Title                                       | Ending Hourly                         |  |
|  | Rate/Salary                           |  |
| Reason for Leaving   | \$ per                                |  |
| May we contact this employer? ☐ Yes ☐ No Telephone                   | Dates Employed                        | Summarize the nature of the work                                     |
| Employer /   | From:/                                | performed and job responsibilities.                                  |
| Address  | To:/                                  |  |
| Job Title  | <u>Starting</u> Hourly<br>Rate/Salary |  |
| Immediate Supervisor and Title                                       | \$ per                                |  |
|  | <u>Ending</u> Hourly<br>Rate/Salary   |  |
| Reason for Leaving   | \$ per                                |  |
| May we contact this employer? ☐ Yes ☐ No                             |                                       |  |
| Please explain any gaps in your employment history.                  |                                       |  |
|  |                                       |  |
| What other business experience, personal experience or traini        | ng have you had that may              | have prepared you for this position?                                 |

| Personal References   | Do not list rel | atives or past employers. |  |  |  |  |  |
|---|-----------------|---------------------------|--|--|--|--|--|
| Name:   | Occupation:     | Years<br>Known:           |  |  |  |  |  |
| Address:  | City: State:    |                           |  |  |  |  |  |
| E-mail:   | Phone: / Alter  | rnate #:<br>/             |  |  |  |  |  |
| Name:   | Occupation:     | Years<br>Known:           |  |  |  |  |  |
| Address:  | <u> </u>        | Zip:                      |  |  |  |  |  |
| E-mail:   |                 | rnate #:<br>/             |  |  |  |  |  |
| Name:   | Occupation:     | Years<br>Known:           |  |  |  |  |  |
| Address:  |                 | Zip:                      |  |  |  |  |  |
| E-mail:   |                 | rnate# :<br>/             |  |  |  |  |  |
| Application Acknowledgement and Authorization  Please read all statements and sign below:  I authorize both the SPFFC and persons listed (references, schools, current (unless noted) and former employers and any others with whom you desire to check) to communicate with regard to any relevant information that may be required to reach an employment decision. I agree to hold such persons harmless with respect to any information they may supply. I understand and agree that any offer of employment is contingent upon successful completion of all background check processes, including a criminal history background check.  I certify that all information provided by me in this application is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation, or omission of any facts in this application or any other document submitted in connection with SPFFC employment will result in denial of employment or termination of employment regardless of the timing or circumstances of discovery.  If I am employed by the SPFFC I understand my employment can be terminated, with or without cause and  |                 |                           |  |  |  |  |  |
| with or without notice, at any time at the option of the SPFFC or myself. I understand that, other than the CEO of the SPFFC, no manager, supervisor or representative of the SPFFC has authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing. Only the CEO of the SPFFC has the authority to make any agreement contrary to the foregoing and then only in writing. I further expressly agree that, with respect to the at-will employment relationship, this constitutes the full, complete and final expression of the parties' intent concerning the nature of any employment relationship between myself and the SPFFC.  I understand that all offers of employment are conditional upon my ability to provide appropriate documents regarding my identity and legal right to work in the United States. I understand that this application is only the for the parties applied for the provider that the SPFFC is not obligated to retain a position and that this application is only to the second that the second |                 |                           |  |  |  |  |  |
| valid for the position applied for at present and that the SPFFC is not obligated to retain or consider this application for future openings. If hired, I agree to abide by SPFFC policies and rules at all times. I acknowledge that I have read the above statements and understand them.   |                 |                           |  |  |  |  |  |
| Signature:  | Date            | e:                        |  |  |  |  |  |