



THE WORKOUT CLUB & WELLNESS CENTER, INC.
THE WORKOUT CLUB & WELLNESS CENTER OF DERRY, INC.
THE WORKOUT CLUB & WELLNESS CENTER OF MANCHESTER, INC.
FITWORKS EXPRESS, INC.
THE WORKOUT CLUB & WELLNESS CENTER OF SALEM, INC.
 (collectively "WORKOUT CLUB" or "COMPANY")

APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

Thank you for your interest in employment with the Workout Club. As part of our procedure for processing your employment application, all statements made by applicants for employment on this application form may be checked for accuracy. We offer equal employment opportunities to all persons without regard to race, color, religion, creed, age, marital status, or veterans' status, sex, sexual orientation, national origin, physical or mental disability, genetic information, or any other status protected by law.

PERSONAL INFORMATION

Name (Last, First)		Date	
Present Address:	City:	State:	Zip Code:
Previous Address:	City:	State:	Zip Code:
Telephone No. :	Emergency Contact and Telephone No:		
Are you over the age of 18? _____ Yes _____ No	Do you have the legal right to work in the United States? _____ Yes _____ No		
If you were referred by someone, please state that person's name:	If no, explain why: _____ _____		

Position(s) applied for: _____

Desired location: _____

Type of employment: _____ Full Time _____ Part Time

Rate of Pay Expected: _____

What days and hours are you available to work? Days : _____

Hours: From _____ () AM () PM To _____ () AM () PM

When can you start work? _____

EDUCATION HISTORY

TYPE OF SCHOOL	NAME AND ADDRESS OF SCHOOL	COURSES MAJORED IN	CHECK LAST YEAR COMPLETED	GRADUATE? GIVE DEGREES
Elementary			5 6 7 8	
High School			9 10 11 12	
College			1 2 3 4	
Trade, Business or Other Education				
Subjects of Special Study/Research, Work or Training/Skills:				

Please list any other experiences, skills, or other qualifications including hobbies which you believe should be considered in evaluating your qualifications for employment.

Have you applied for a job with us before? Yes No

Have you ever worked for us before? Yes No If yes, please state when, position held and for whom you worked _____

WORK HISTORY (Start with most recent or present employer and complete in full)

1. Name and Address of Most Recent Employer:		Telephone No. _____	
Immediate Supervisor (Name and Position):	Date Hire:	Starting Rate:	
Job Title & Duties:	Date Left:	Last Rate:	
Reason for Leaving:		May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Name and Address of Next Most Recent Employer:		Telephone No. _____
Immediate Supervisor (Name and Position):	Date Hire:	Starting Rate:
Job Title & Duties:	Date Left:	Last Rate:
Reason for Leaving:		May we contact this employer? ___ Yes ___ No

3. Name and Address of Next Most Recent Employer		Telephone No. _____
Immediate Supervisor (Name and Position):	Date Hire:	Starting Rate:
Job Title & Duties:	Date Left:	Last Rate:
Reason for Leaving:		May we contact this employer? ___ Yes ___ No

Are you employed now? ___ Yes ___ No Why do you desire to make a change? _____

Are any of your relatives presently employed with the Workout Club or its divisions? ___ Yes ___ No

If yes, name of relation: _____

Consistent attendance and punctuality are essential requirements of every job with the Company. Is there anything which would interfere with your regular attendance and punctuality if you are offered a job with the Company?
___ Yes ___ No

If yes, please explain _____

Have you ever been terminated, or requested to resign from a position? ___ Yes ___ No
If yes, give circumstances: _____

Have you ever been disciplined by an employer, such as received a warning, been suspended, or required to take special classes related to a disciplinary matter? ___ Yes ___ No
If yes, please explain: _____

Have you ever been convicted of a crime, which conviction has not been annulled, except a minor traffic violation? Yes No

If yes, provide details including the following: state, citation, date, court, and place.

Please note: A conviction record will not necessarily be a bar to employment. Factors such as job relatedness, age and time of offense, seriousness and nature of violation and rehabilitation will be taken into account.

Are you prohibited from or limited in your performance of any job duties by any restrictive covenants not to compete, confidentiality agreements or other contractual obligations? Yes No
If yes, please provide a copy of that agreement.

ADDITIONAL REFERENCES: Please list three people, not your relatives, who you have known for three years or more.

Name:	Address:	Telephone No:
Name:	Address:	Telephone No:
Name:	Address:	Telephone No:

**APPLICANT'S STATEMENT OF UNDERSTANDING, AGREEMENT
AND AUTHORIZATION FOR REFERENCE CHECK**

Please check the boxes below to confirm your understanding and agreement to each of the following:

- I have read and fully understand the questions asked in this application. I certify that the information set forth in this employment application is accurate and complete. I understand that any misrepresentation, falsification, or omission on this application will result in the immediate rejection of my application or, if I am hired, may result in my immediate termination from employment.

- I authorize the Company and its agents and representatives to contact all or any of my past employers, (unless otherwise noted above under "Work History") education/academic institutions and references and authorize them to provide all information requested of them, and release and hold harmless the Company for acting or relying on the information so received.

- I agree that if I am hired I will conform my behavior and performance to the expectations set forth in the policies and procedures of the Company.

- I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between the Company and myself for either employment or for the providing of any benefit. No promises regarding employment have been made to me. I understand that, if employed, my employment is at will, and that I can be terminated, without notice or cause, at any time, at the option of the Company. I also understand that I may resign at any time without notice or cause.

Applicant's Signature: _____ **Date:** _____

Applicant's Printed Name: _____

Please submit application to:

**Human Resources
The Workout Club and Wellness Center**

