



# Application For Employment

500 Quintana Road  
 Morro Bay, CA 93442  
 (805) 772-8969 (805) 772-0409 Fax

## Personal Information

Name:		Date:	
Social Security Number:			
Home Address:			
City, State, Zip:			
Home Phone:		Business Phone:	
U.S. Citizen?		If not, can you provide proof of your right to work in the U.S.:	

## Position Applying For

Title:	Salary Desired:
Referred By:	Date Available:

## Education

High School (Name, City, State):		
Graduation Date:	Extra Curricular Activities:	
Areas of Special Study:		
Undergraduate College:		
Did you graduate:	Major:	Relevant Coursework:
Graduate School:		
Did you graduate:	Major:	Relevant Coursework:

## Criminal Record

Have you ever been convicted of a misdemeanor or felony: Yes \_\_\_ No \_\_\_ A yes answer does not necessarily bar you from employment with FitnessWorks.

Explanations:

## References

Please list three professional references:			
Name:	Phone #: ( )	Position:	Years acquainted:
Name:	Phone #: ( )	Position:	Years acquainted:
Name:	Phone #: ( )	Position:	Years acquainted:

## Employment History

Name of Present Employer:

Address:		City:	State:	Zip:
Starting Date:	Leaving Date:	Job Title:		
Starting Salary:	Leaving Salary	May We Contact Your Supervisor:		
Name of Supervisor	Title	Phone:		
Description of Position:				
Reason for Leaving:				

Name of Previous Employer:

Address:		City:	State:	Zip:
Starting Date:	Leaving Date:	Job Title:		
Starting Salary:	Leaving Salary	May We Contact Your Supervisor:		
Name of Supervisor:	Title:	Phone:		
Description of Position:				
Reason for Leaving:				

Name of Previous Employer:

Address:		City:	State:	Zip:
Starting Date:	Leaving Date:	Job Title:		
Starting Salary:	Leaving Salary:	May We Contact Your Supervisor:		
Name of Supervisor:	Title:	Phone:		
Description of Position:				
Reason for Leaving:				

If more space is needed for additional employment history, please attach an additional sheet.

### FitnessWorks is An Equal Opportunity Employer

**As an equal opportunity employer, we do not and will not discriminate on the basis of race, religion, national origin, sex, age, handicap, marital status, or status as a disabled veteran. Information provided on this application will not be used for any discriminatory purpose.**

**Your complete application form will be maintained in our active files for six (6) months from the date of application. You may submit a new application at any time.**

**I certify under penalty of perjury that the information I have entered on this application is true and complete to the best of my knowledge. I further understand that any false, incomplete, or incorrect statements may result in my disqualification for or dismissal from employment with FitnessWorks. I authorize the employers and educational institutions identified on this application to release any information they may have concerning my employment or education to the State of California.**

**I understand that my employment may be contingent upon receipt of an alien registration number, verification of birth, and any other pertinent information bearing upon my employment, and that my continued employment depends upon the will of the company or myself.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date