

# East Penn Children's Fitness Academy, LLC

OFFICE USE ONLY
Interview Date: _____

## Employment Application

### Applicant Information

Name: \_\_\_\_\_ Date: \_\_\_\_\_  

Last
First
M.I.

Address: \_\_\_\_\_  

Street
Apt
City
State
Zip Code

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Position applying for: \_\_\_\_\_ Desired Salary: \$ \_\_\_\_\_ Date Available: \_\_\_\_\_

Do you have work experience in early childhood development, gymnastics, tumbling, dance or cheering? YES NO

Explain: \_\_\_\_\_  
 \_\_\_\_\_

Are you legally authorized to work in the United States? YES NO

### Education School

	Did you graduate? (Yes/No) Year Degree/Course		
High School			
College			
Other			

### Employment Record (most recent first)

Company: \_\_\_\_\_ Address: \_\_\_\_\_

Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Wage: \$ \_\_\_\_\_ /hour Reason for Leaving: \_\_\_\_\_

Company: \_\_\_\_\_ Address: \_\_\_\_\_

Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

State Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Wage: \$ \_\_\_\_\_ /hour Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisors for a reference? YES NO

### AVAILABILITY

Hours Available	M	T	W	T	F	S	S
FROM							
TO							

Total hours available per week: \_\_\_\_\_ **Email completed form to: EPCFA2010@gmail.com**