



HEALTH & RACQUET CLUB

512-353-0789
www.mythrc.com

APPLICATION FOR EMPLOYMENT

NAME _____ PHONE _____
 ADDRESS _____ EMAIL _____

Date _____ Position Applying For _____

Applying for:

- Part Time (10-35 hrs/week)
- Full Time (35-40 hrs/week)

Referred By:

- Advertisement
- Individual _____
- Walk-In

Do you have any friends that work for Great Tans?

- YES _____
- NO

EDUCATION

High School, College, University / City, State	Field of Study	Did you graduate?	If yes, what year?	If no, when do you expect to graduate?
		<input type="checkbox"/> YES <input type="checkbox"/> NO		
		<input type="checkbox"/> YES <input type="checkbox"/> NO		
		<input type="checkbox"/> YES <input type="checkbox"/> NO		

List any other type of training or special skills that might be useful to the position you are applying for.

Are you involved in any organizations? YES NO If yes, please specify and list any leadership positions held.

AVAILABILITY

If you are currently taking classes, or expect to be in the next 3 months, please list your school schedule below.

MONDAY	
TUESDAY	
WEDNESDAY	
THURSDAY	
FRIDAY	
SATURDAY	
SUNDAY	

AVAILABILITY *continued*

How many hours per week do you want to work? _____

Are you available to start immediately? YES NO If no, when will you be available? _____

EMPLOYMENT HISTORY

Are you currently employed? YES NO

Current or most recent employer

Business/Company Name _____ City, State _____

Job Title _____ Dates Employed (month/year) From _____ To _____

What did your duties consist of? _____

Reason for Leaving _____

Contact Name _____ Phone Number _____ May we contact this employer? YES NO

Next most recent employer

Business/Company Name _____ City, State _____

Job Title _____ Dates Employed (month/year) From _____ To _____

What did your duties consist of? _____

Reason for Leaving _____

Contact Name _____ Phone Number _____ May we contact this employer? YES NO

Next most recent employer

Business/Company Name _____ City, State _____

Job Title _____ Dates Employed (month/year) From _____ To _____

What did your duties consist of? _____

Reason for Leaving _____

Contact Name _____ Phone Number _____ May we contact this employer? YES NO

I hereby certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if employed, any falsified statement herein is considered sufficient cause for dismissal. I understand that information concerning past employment, and other facts, are subject to inquiry.

Signature _____ Date _____

OFFICE USE ONLY

Date Interviewed _____ Interviewer's Name _____

Notes _____

Date Hired _____ Start Date _____