

KEARNS OQUIRRH PARK FITNESS CENTER

Oquirrh Recreation and Parks District

5624 South 4800 West, Kearns, UT 84118

(801) 966-5555, FAX (801) 966-3670

JOB APPLICATION

ANY OFFER OF EMPLOYMENT FOR APPLICANTS 18 YRS AND OLDER IS CONTINGENT UPON SUBMISSION TO AND SUCCESSFUL COMPLETION OF A CRIMINAL BACKGROUND CHECK

Personal Information

Name: _____ Date: _____

Address: _____ Phone(s): _____

Street

Apt #

City

State

Zip

Are You 18 or Older? Yes No

Work Preference

Type of Work Desired: _____ Salary or Pay Desired: _____

Describe Your Prior Experience in the Type of Work You Are Applying For: _____

Describe Any Formal Schooling or Training for this Work: _____

List Any Licenses, Security or Bonding Clearance, or Certifications You Have: _____

Skills & Qualifications (Typing, Machine Operation, Etc.): _____

Do You Speak Any Foreign Languages?: _____ If So, Please Indicate Foreign Languages You Speak: _____

How Did You Find Out About This Position? Friend Relative Employment Agency Newspaper

Job Postings at the Fitness Center Other—State Name of Agency/Individual: _____

Availability for Work

Date Available for Work: _____ Full-Time Part-Time Temporary

Shifts or Times You Are Available To Work (Check All That Apply): Early Morning Day Afternoon Evening

Graveyard Rotating Saturday Sunday Holidays

Will You Work Overtime On Occasion if Necessary? Yes No

Do You Plan To Work Elsewhere or Attend School While Working? Yes No

Personal Health

If offered a position, your employment may be conditioned upon the results of a medical examination, drug test, and/or job-related tests.

Prior Events

Have You Ever Worked For This Organization Before? Yes No

If Yes, Please Explain (Use Additional Sheets if Necessary): _____

Have You Ever Been Discharged For Cause? Yes No

Do You Have Any Family/Friends Working For This Organization? _____, If Yes, Whom: _____

Hobbies/Interests? _____

HR Review _____

Education & Training

(Even if this information is included on an attached resume, please include it here)

Do You Have Current CPR and First Aid Certifications? { } Yes { } No If Yes, Type (Professional, Community, Etc.): _____

High School

Name(s) of High School Attended: _____ Location(s): _____

Circle Highest Year Completed: 7 8 9 10 11 12

Special Courses (typing, technical, etc.): _____

College or University

Name(s): _____ Location(s): _____

Years Attended: _____ Year Graduated: _____ Degree(s): _____

Major Subjects: _____

Other (Graduate, Trade School, Correspondence Schools, Etc.)

Name(s): _____ Location(s): _____

Length of Course: _____ Was Course Completed? _____ Date: _____

Subject(s): _____

Employment History

(Complete this section even if you have attached a resume. Give a complete account of your employment, including military service. Begin with your most recent position and work backwards.)

1. Employer: _____ Supervisor's Name: _____

Address: _____ Phone: _____

Main Duties: _____

From: _____ To: _____ Starting Pay: _____ Leaving Pay: _____

Why Did You Leave? _____ May We Contact This Employer As A Reference? { } Yes { } No

2. Employer: _____ Supervisor's Name: _____

Address: _____ Phone: _____

Main Duties: _____

From: _____ To: _____ Starting Pay: _____ Leaving Pay: _____

Why Did You Leave? _____ May We Contact This Employer As A Reference? { } Yes { } No

3. Employer: _____ Supervisor's Name: _____

Address: _____ Phone: _____

Main Duties: _____

From: _____ To: _____ Starting Pay: _____ Leaving Pay: _____

Why Did You Leave? _____ May We Contact This Employer As A Reference? { } Yes { } No

References

1. Name: _____ Phone: _____ Relationship: _____

2. Name: _____ Phone: _____ Relationship: _____

3. Name: _____ Phone: _____ Relationship: _____

Certificate of Applicant

All information on this form is true and correct to the best of my knowledge. I understand that any omission or misrepresentation of information may cause my application to be rejected or, if I am hired, may cause me to be terminated. I authorize any employer accepting this application and any person, organization, former employer, or other entity listed in this application to ask or answer any and all questions about me and I agree not to sue and to hold harmless any person or entity that provides information or expresses an opinion about me or my performance. I understand that this document is an application for employment and not an offer for employment. I understand that if I am employed, my employer may terminate me at any time without reason or explanation. If hired, I agree to protect the confidentiality of any confidential information I obtain as a consequence of my employment. If hired, I agree that the value of any advance payment, property issued me, or other debt I owe my employer shall be due upon termination of my employment and may be deducted from wages or other payments owed me at the time of such termination.

Applicant's Signature _____

Date _____