

## APPLICATION FOR EMPLOYMENT

<b>PERSONAL INFORMATION</b>		First Name	Middle Name	Last Name
Address (local)		City	State	Zip Code
Address (permanent)		City	State	Zip Code
Primary Telephone #	Secondary Telephone #	Birth Date	Email Address	

Date: **Please Circle:**

Are you legally eligible for employment in the USA? Yes    No  
 If no, please explain:

Have you ever worked with us before? Yes    No  
 If yes, when?

Have you ever been convicted of a felony? Yes    No  
 If yes, please explain:

Preferred T-shirt Size S    M    L    XL    XXL

If hired, when are you able to start working? Date:

How did you find out about this position?

Please list any additional training, specialties, languages, or certifications and years of experience:

Please list any relevant experience: healthcare, drama, fitness, dance, or cheer and years of experience:

Please list any experience working with kids or volunteer activities and years of experience:

<b>EMPLOYMENT INTERESTS</b>	Please indicate area (s) of interest	
	<input type="checkbox"/> <b>Office Manager</b>	
<b>SUMMER POSITIONS</b> <i>(working with kids ages 3-12)</i>	<b>SPRING/FALL POSITIONS</b> <i>(working with kids ages 3-12)</i>	
<input type="checkbox"/> <b>Area Camp Coordinator</b>	<input type="checkbox"/> <b>KidFit Sports Instructor</b>	<input type="checkbox"/> <b>Dance Instructor</b>
<input type="checkbox"/> <b>Camp Director</b>	<input type="checkbox"/> <b>Area Program Manager</b>	<input type="checkbox"/> <b>Early Childhood</b>
<input type="checkbox"/> <b>Camp Instructor</b>	<input type="checkbox"/> <b>Club Glee Instructor (Sing, Dance, Act)</b>	
<input type="checkbox"/> <b>Camp Volunteer</b>	<input type="checkbox"/> <b>Class Volunteer</b>	

EDUCATION/TRAINING		
High School	Course of Study	Degree/Diploma
City		Date of Graduation
State		
College/University	Course of Study	Degree/Diploma
City		Date of Graduation
State		
Other	Course of Study	Degree/Diploma
City		Date of Graduation
State		

WORK EXPERIENCE			
Dates	Total Years	Company Name	Supervisor's Name
From	To	Position Title	Supervisor's Title
Salary/Hourly Wage	# of hours per week	Address	Telephone
		Reason For Leaving	May we contact this employer?
Duties			
Dates	Total Years	Company Name	Supervisor's Name
From	To	Position Title	Supervisor's Title
Salary/Hourly Wage	# of hours per week	Address	Telephone
		Reason For Leaving	May we contact this employer?
Duties			
Dates	Total Years	Company Name	Supervisor's Name
From	To	Position Title	Supervisor's Title
Salary/Hourly Wage	# of hours per week	Address	Telephone
		Reason For Leaving	May we contact this employer?
Duties			

<b>REFERENCES</b> <i>Please do not use relatives</i>	Name and Occupation	Phone
1)		
2)		
3)		

<b>CONDITIONS OF EMPLOYMENT</b>	
<p>Club KidFit sets high standards for its employees and compliance with these standards is a condition of employment. If you are offered a position with Club KidFit, please carefully consider what we require of you before you accept. As an employee you are required to:</p> <ul style="list-style-type: none"> <li>• Arrive on time. (10 minutes before class begins)</li> <li>• Participate in required training, meetings, and continuing education programs.</li> <li>• Maintain a positive, enthusiastic attitude.</li> <li>• Be a healthy role model for both kids and adults.</li> <li>• Follow company standards of professionalism.</li> <li>• Treat co-workers and managers with respect.</li> <li>• Be honest and dedicated in your work.</li> <li>• Maintain a professional appearance and comply with dress code.</li> <li>• Promote a healthy, positive lifestyle by refraining from smoking, drug, or alcohol use while at work.</li> <li>• Refrain from negative comments and profane language.</li> <li>• Be subject to a background check.</li> </ul> <p>If you feel you can comply with the Conditions of Employment, please sign below and send application to Club KidFit PO BOX 410181, St. Louis, MO 63141-0181. If you are unable to comply, please explain:</p>	
Signature	Date

<b>STATEMENT OF VALIDITY</b>	
<p>I declare the information provided by me in this application is true, correct, and complete to the best of my knowledge. I understand that if employed, any falsification, misstatement, or omission of fact in connection with my application, whether on this document or not, may result in immediate termination of employment. I authorize you to verify any and all information provided above.</p> <p>I acknowledge that if I become employed, I will be free to terminate my employment at any time for any reason, and that Club KidFit retains the same rights. No Club KidFit representative has the authority to make any contrary agreement.</p> <p>I hereby give permission to contact the references listed.</p>	
Signature	Date

Please return application to Joy Holdmeier, Program Manager  
 PO Box 410181 | Saint Louis, MO | 63141  
**PHONE** (314) 488-4154 | **FAX** (314) 432-5382 | **EMAIL** JHoldmeier@ClubKidFit.org

*Club KidFit is dedicated to providing kids and families with knowledge and resources to live an active, healthy lifestyle. Club KidFit wellness programs engage, entertain and educate today's youth in a positive, non-competitive environment.*