

# PHYSIQFITNESS

See Current Job Openings

## APPLICATION FOR EMPLOYMENT

### GENERAL INFORMATION

Name (Last)	(First)	(Middle Initial)	Home Telephone
Address (Mailing Address)	(City)	(State)	(Zip) Other Telephone
E-Mail Address	Are you legally entitled to work in the U.S.? Yes No		

### POSITION

Position Or Type Of Employment Desired	Will Accept:	Shift:
Are you able to perform the essential functions of the job you are applying for, with or without reasonable accommodation? Yes No		
Salary Desired	Date Available	

### EDUCATION AND TRAINING

High School Graduate Or General Education (GED) Test Passed? Yes No						
If no, list the highest grade completed						
<b>College, Business School, Military (Most recent first)</b>						
Name and Location	Dates Attended Month/Year	Credits Earned		Graduate	Degree & Year	Major or Subject
		Quarterly or Semester Hours	Other (Specify)			
	From					
	To					
	From					
	To					
	From					
	To					
Occupational License, Certificate or Registration	Number	Where Issued		Expiration Date		
Occupational License, Certificate or Registration	Number	Where Issued		Expiration Date		
Occupational License, Certificate or Registration	Number	Where Issued		Expiration Date		
Languages Read, Written or Spoken Fluently Other Than English						

### VETERAN INFORMATION (Most recent)

Branch of Service	Date of Entry	Date of Discharge
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### SPECIAL SKILLS/ CERTIFICATIONS (List all pertinent skills and equipment that you can operate)

(Maximum 300 characters)

**WORK EXPERIENCE (Most Recent First) (Include voluntary work and military experience)**

Employer	Telephone Number	From (Month/Year)
Address		
Job Title	Number Employees Supervised	To (Month/Year)
Specific Duties (Maximum 350 characters)		Hours Per Week
		Last Salary
		Supervisor
Reason For Leaving	May We Contact This Employer? Yes No	
Employer	Telephone Number	From (Month/Year)
Address		
Job Title	Number Employees Supervised	To (Month/Year)
Specific Duties (Maximum 350 characters)		Hours Per Week
		Last Salary
		Supervisor
Reason For Leaving	May We Contact This Employer? Yes No	
Employer	Telephone Number	From (Month/Year)
Address		
Job Title	Number Employees Supervised	To (Month/Year)
Specific Duties (Maximum 350 characters)		Hours Per Week
		Last Salary
		Supervisor
Reason For Leaving	May We Contact This Employer? Yes No	
Employer	Telephone Number	From (Month/Year)
Address		
Job Title	Number Employees Supervised	To (Month/Year)
Specific Duties (Maximum 350 characters)		Hours Per Week
		Last Salary
		Supervisor
Reason For Leaving	May We Contact This Employer? Yes No	

I certify the information contained in this application is true, correct, and complete. I understand that, if employed, false statements reported on this application may be considered sufficient cause for refusal to hire, or dismissal if I have been employed, no matter when discovered by Physiq Fitness.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

I understand that any employment at Physiq Fitness may be conditioned on a background check (consumer report). I authorize Physiq Fitness to thoroughly investigate all statements contained in my application or resume. Furthermore, I authorize my former employers and references to disclose information regarding my former employment, character, and general reputation to Physiq Fitness without giving me prior notice of such disclosure. In addition, I release Physiq Fitness, any former employers, and all references listed above from any and all claims, demands or liabilities arising out of or related to such investigation or disclosure.

I understand and agree that nothing contained in this application, or conveyed during my interview, is intended to create a contract for employment for a fixed term. I further understand and agree that if I am hired, my employment will be "at will" and without fixed term, and may be terminated at any time, with or without cause and without prior notice, at the option of either myself or Physiq Fitness. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon Physiq Fitness unless made in writing.

I understand that filling out this form does not indicate there is a position open and does not obligate Physiq Fitness to hire. If hired, I agree to abide by all Physiq Fitness work rules, policies and procedures. Physiq Fitness retains the right to revise its policies or procedures, in whole or in part, at any time.

\_\_\_\_\_ I acknowledge that I have read this Certification and understand and agree with each of its terms.

## Criminal Background Check Authorization and Liability Release

I voluntarily authorize Physiq Fitness of Salem, OR to conduct an investigation of whether I have a record of criminal convictions, and, if so, of the nature of those convictions and all surrounding circumstances.

I understand that this background check will focus on convictions and that a criminal record will not necessarily disqualify me from employment.

I understand that the report of this investigation will be used to make decisions about my employment, including one or more of the following: hiring, firing, promotion, and reassignment.

I release Physiq Fitness, its employees, officers, representatives, investigative agency, and anyone else from all claims, liability, and damages that may result from negligently investigating, furnishing, communicating, reviewing, or evaluating information pursuant to this criminal background check and from the use of the report. This release means I am waiving claims for negligence, misrepresentation, emotional distress, invasion of privacy, interference with prospective business relations or contract, breach of contract, and any other negligent act. I expressly intend that this release is as broad and inclusive as is permitted by law. Also, if any portion of this release is held invalid, the balance of the release will continue in full legal force.

I acknowledge that I have read this Authorization and Release and understand and agree with each of its terms. \_\_\_\_\_

# PLEASE READ AND ACKNOWLEDGE:

The facts set forth in my application for employment are true and complete to the best of my knowledge. I understand that if employed, false statements or omissions on this application, my resume or accompanying documents, may result in termination, regardless of the time elapsed before discovery.

I understand that an offer of employment is contingent upon satisfactory proof of lawful employment status, as set forth in the Immigration Reform and Control Act of 1986 and reference and background checks. I understand that the Physiq Fitness companies or any agent thereof may conduct an investigation into my previous employment, educational background, and reference information including job performance, salary history, employment dates, etc. If so, I will be provided with separate notification and authorization. I understand that my employment will be contingent upon any such investigation and I will provide my consent to such investigation. I release Physiq Fitness, its subsidiaries and current or former employers from any liability resulting from any information provided in connection with this application.

Finally, I understand that if I am offered employment by Physiq Fitness, my employment at Physiq Fitness will be "at-will" meaning that either I or Physiq Fitness may end the employment at any time with or without cause.

I acknowledge that I have read the above and understand and agree with each of its terms.

x \_\_\_\_\_  
Signature Date

**DISCLAIMER:** Physiq Fitness health clubs are independently owned and operated. The owner of the health club to which you apply may request additional information as part of your application. By submitting your application, you acknowledge and agree that your information may be sent to the owner of the health club location in which you seek employment.

Interviewer's Comments:


EMAIL TO: [info@physiqfitness.com](mailto:info@physiqfitness.com)