

# Sports Network and Fitness Employment Application



**An Equal Opportunity Employer:** Sports Network is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Applicants requiring reasonable accommodation in the application and/or interview process should notify a Sport Network representative.

## Applicant Information

Date of Application \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: (H) \_\_\_\_\_ (C) \_\_\_\_\_ Social Security # \_\_\_\_\_

Position(s) Applying For:  Athletic Associate (Part-time)  Referee (Sport) \_\_\_\_\_  
 Lil Dream Team Coach (Youth Basketball)  Lil Kicker Coach (Youth Soccer Program)  
 Administrative Position \_\_\_\_\_  Other: \_\_\_\_\_

### Applying for:

- Temporary Work – such as summer or holiday work? [ ] Y or [ ] N
- Regular part-time work? [ ] Y or [ ] N
- Regular full-time work? [ ] Y or [ ] N

How were you referred to SNF? \_\_\_\_\_ If hired, when would you be able to start? \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

### What days and hours are you available for work?

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
List available times							

Are you available to work weekends? [ ] Y or [ ] N

Are you available to work evenings? [ ] Y or [ ] N

Desired pay rate: \$ \_\_\_\_\_

## Personal Information

Have you ever applied to work for SNF before?..... [ ] Y or [ ] N  
 If yes, please explain (include date): \_\_\_\_\_

Do you have any friends, relatives, or acquaintances working for SNF?..... [ ] Y or [ ] N  
 If yes, state name & relationship: \_\_\_\_\_

If hired, would you have transportation to/from work..... [ ] Y or [ ] N

Are you over the age of 18? (If under 18, hire is subject to verification of minimum legal age)..... [ ] Y or [ ] N

If hired, would you be able to present evidence of your U.S. citizenship or proof of your legal right to work in the United States?..... [ ] Y or [ ] N

If hired, are you willing to submit to a background check?..... [ ] Y or [ ] N

In the past five years, have you been convicted of any crimes?..... [ ] Y or [ ] N  
 If yes, please explain: \_\_\_\_\_

## Education/Training/Experience

High School: \_\_\_\_\_  
 School Address: \_\_\_\_\_ School city, State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Number of years completed: \_\_\_\_\_ Did you graduate? [ ] Y or [ ] N Year graduated: \_\_\_\_\_

College/University School Name: \_\_\_\_\_  
 School Address: \_\_\_\_\_ School city, State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Number of years completed: \_\_\_\_\_ Did you graduate? [ ] Y or [ ] N Year graduated: \_\_\_\_\_

**Vocational School Name:** \_\_\_\_\_  
**School Address:** \_\_\_\_\_ **School city, State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_  
**Number of years completed:** \_\_\_\_\_ **Did you graduate?** [ ] Y or [ ] N **Year graduated:** \_\_\_\_\_  
**Military:** \_\_\_\_\_  
**Branch:** \_\_\_\_\_ **Rank in Military:** \_\_\_\_\_  
**Total Years of Service:** \_\_\_\_\_ **Skills/Duties:** \_\_\_\_\_

**Please list previous employers**

Employer Information	Responsibilities List all tasks performed and skills acquired	Permission to Contact
<b>Employer Name:</b> <b>Address:</b>  <b>Contact:</b> <b>Contact Phone:</b>		<input type="checkbox"/> Yes or <input type="checkbox"/> No <b>If no please state why:</b> _____ _____ _____
<b>Employer Name:</b> <b>Address:</b>  <b>Contact:</b> <b>Contact Phone:</b>		<input type="checkbox"/> Yes or <input type="checkbox"/> No <b>If no please state why:</b> _____ _____ _____
<b>Employer Name:</b> <b>Address:</b>  <b>Contact:</b> <b>Contact Phone:</b>		<input type="checkbox"/> Yes or <input type="checkbox"/> No <b>If no please state why:</b> _____ _____ _____

**Please list all references**

Name	Telephone	Years Known

**Any employment will be subject to the following. Please read very carefully before signing:**

Employment between the Team Member and Sports Network and Fitness, Inc. is based on a voluntary relationship. Either the Team Member or Sports Network and Fitness, Inc. may terminate the employment relationship at any time, with or without cause, and with or without prior notice at the option of either the Company or the Team Member. Any agreement to the contrary must be in writing and signed by Sports Network and Fitness, Inc. in order to be binding.

I hereby authorize Sports Network and Fitness, Inc. to thoroughly investigate my references, work record, and education, and further authorize references I have listed to disclose the Company any and all letters, reports, and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release Sports Network and Fitness, Inc., my former employers, and all other persons, corporations, partnerships and associations from any and all claims demands or liabilities arising out of or in any way related to such investigation or disclosure.

Team Members are prohibited, both during and following termination of employment, from disclosing information constituting Sports Network and Fitness, Inc.'s trade secrets. Trade secrets include confidential training materials, financial statements and reports, product pricing information, discount information, cost information, and the like. This information is strictly confidential.

Notwithstanding the foregoing, it should be specifically understood that any failure of a Team Member to conform to the rules and regulations of Sports Network and Fitness, Inc., misrepresentation, and/or omission in this application shall be cause for immediate dismissal.

If employed, I agree to work the hours, days and shifts as scheduled. Failure to report to work when scheduled and/or repeated tardiness may be grounds for immediate dismissal.

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