



EMPLOYMENT APPLICATION

Xtreme Altitude Gymnastics, Inc.

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Lafayette, CO. 80026
Fax. 303-465-6047

Email: lafayette@xtremealtitude.com
www.xtremealtitude.com

PERSONAL INFORMATION

Name (last)	First	Middle	Social Security No.
Address (street)	City/State	Zip	Phone Cell
Email Address			
Are you 18 years or older? <input type="checkbox"/> yes <input type="checkbox"/> no If no, enter your age _____ yrs. DOB ____/____/____			
Are you a citizen of the United States or have a legal right to work in this country? <input type="checkbox"/> yes <input type="checkbox"/> no			
Have you ever been convicted of a felony? <input type="checkbox"/> yes <input type="checkbox"/> no If yes, please explain:			
Positions/Departments Applying for?		How did you learn about us?	
Pay Range Expected?	Seasonal or year-round?	Date available to start?	

At Xtreme Altitude, we believe in building strong relationships. However, sometimes business relationships do not work out, despite best intentions from both parties. For this reason, either party reserves the right to terminate employment at any time, with or without notice and with or without reason.

EDUCATIONAL INFORMATION

High School	Graduated?	Years Completed	Major/Course of study
College	Graduated?	Years Completed	Major/Course of study

EMPLOYMENT HISTORY

Company Name	Address	Phone Number
Name of immediate Supervisor?		Are you currently employed at this company? <input type="checkbox"/> yes <input type="checkbox"/> no
Start wage?	End wage?	Reason for leaving?
Start date?	End date?	
Job Title or position?		Describe your duties and responsibilities

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Name of immediate Supervisor?		Are you currently employed at this company? <input type="checkbox"/> yes <input type="checkbox"/> no
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Job Title or position?	Describe your duties and responsibilities
Describe any honors, awards or special training that you feel will aid you in the position for which you are applying:	
Please tell us why you feel you would be a great addition to our team:	

POLICIES AND AGREEMENTS

I certify that the statements given on this application and during my interview are true and complete.

I understand that if I am hired based on any falsified information provided in this application or during my interview, my employment at Xtreme Altitude will be immediately terminated.

I authorize the contact of any references I have provided on this application by any Xtreme Altitude representative.

I understand that my continued employment at Xtreme Altitude is contingent upon a successful performance during a 30-day trial period where I will be closely evaluated by my supervisor.

Signature _____

Xtreme Altitude is an EQUAL OPPORTUNITY EMPLOYER and does not discriminate against applicants employees on the basis of race, color, gender, marital status, religion, national origin, veteran status, or disability or any other basis prohibited by local, state, or federal law. No question on this application is intended for or will be used for the purpose of limiting or excusing any applicant's consideration for employment.

OFFICE USE ONLY

Interview date: _____

Interviewed by: _____

Hired? yes no

Position? _____

Salary/Wage: _____

Start date: _____