

# Application for Employment

J&R Sportsplex  
1437 S. Walnut Ave.  
New Braunfels, TX 78130  
(830) 606-0375

J&R Gymnastics  
1307 W. Court  
Seguin, TX 78155  
(830) 303-2581

*We are an equal opportunity employer. We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation or any other legally protected status.*

(PLEASE PRINT)

Position applied for: \_\_\_\_\_ Date of application: \_\_\_\_\_

How did you learn about J&R?

\_\_\_\_ Advertisement    \_\_\_\_ Friend    \_\_\_\_ Relative    \_\_\_\_ Walk-in    \_\_\_\_ Other

\_\_\_\_\_  
Last Name                                      First Name                                      Middle Name

\_\_\_\_\_  
Current Address      (Street, Apt. #)                      City                      State                      Zip Code

\_\_\_\_\_  
Current Telephone Numbers (Home, Cell)

\_\_\_\_\_  
Current E-Mail Address

\_\_\_\_\_  
Permanent Address                                      City                                      State                                      Zip Code

\_\_\_\_\_  
Permanent Telephone Number                      Person to contact in case of emergency                      Phone Number

Are you currently employed?                                      \_\_\_\_ Yes    \_\_\_\_ No

May we contact your present employer?                                      \_\_\_\_ Yes    \_\_\_\_ No

Are you prevented from lawfully becoming employed in this country  
because of Visa or Immigration Status?                                      \_\_\_\_ Yes    \_\_\_\_ No

(Proof required upon employment.)

Are you 18 years of age or older?                                      \_\_\_\_ Yes    \_\_\_\_ No

On what date would you be available for work? \_\_\_\_\_

Are available to work: \_\_\_\_ Full time    \_\_\_\_ Part Time    \_\_\_\_ Temporary

Have you been convicted of a felony within the last 7 years: \_\_\_\_ Yes \_\_\_\_ No  
*Conviction will not necessarily disqualify an applicant from employment.*

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

## Education

Education completed: \_\_\_\_ Elementary School \_\_\_\_ High School \_\_\_\_ College  
\_\_\_\_ Graduate Professional \_\_\_\_ Other (specify)

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Briefly state your philosophy of working with children and disciplining children.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# Employment Experience

Start with your present or last job. Include any volunteer activities.

1.		
Place of Employment	Dates employed	Job Responsibilities
<hr/>		
Address	City, State, ZIP	Telephone number
<hr/>		
Job Title	Supervisor	Hourly rate/Salary (starting/final)
<hr/>		
Reason for leaving		
<hr/>		
2.		
Place of Employment	Dates employed	Job Responsibilities
<hr/>		
Address	City, State, ZIP	Telephone number
<hr/>		
Job Title	Supervisor	Hourly rate/Salary (starting/final)
<hr/>		
Reason for leaving		
<hr/>		
3.		
Place of Employment	Dates employed	Job Responsibilities
<hr/>		
Address	City, State, ZIP	Telephone number
<hr/>		
Job Title	Supervisor	Hourly rate/Salary (starting/final)
<hr/>		
Reason for leaving		
<hr/>		
4.		
Place of Employment	Dates employed	Job Responsibilities
<hr/>		
Address	City, State, ZIP	Telephone number
<hr/>		
Job Title	Supervisor	Hourly rate/Salary (starting/final)
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Reason for leaving		
<hr/>		

List professional, trade, business or civic activities and offices held.

*You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other legally protected status.*

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Other Qualifications:

Summarize special job related skills and qualifications acquired from employment or other experience.

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Specialized skills: \_\_\_\_ PC/MAC \_\_\_\_ Calculator \_\_\_\_ Microsoft Office

State any additional information you feel may be helpful to us in considering your application.

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## References

1. 

<hr/>	<hr/>
Name	Phone
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Address	City, State, ZIP
2. 

<hr/>	<hr/>
Name	Phone
<hr/>	
Address	City, State, ZIP
3. 

<hr/>	<hr/>
Name	Phone
<hr/>	
Address	City, State, ZIP
4. 

<hr/>	<hr/>
Name	Phone
<hr/>	
Address	City, State, ZIP

# Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is an "*at will*" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "*at will*" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

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Signature of Applicant

Date

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## FOR PERSONNEL DEPARTMENT USE ONLY

Arrange interview ☐ Yes ☐ No

Remarks: \_\_\_\_\_

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Interviewer

Date

Employed ☐ Yes ☐ No Date of employment \_\_\_\_\_

Job Title \_\_\_\_\_ Hourly rate/Salary \_\_\_\_\_

By: \_\_\_\_\_

Name and title

Date

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