

EMPLOYMENT APPLICATION

THIS COMPANY DOES NOT DISCRIMINATE ON THE BASIS OF RACE, RELIGION, ORIGIN, SEX, AGE, MARITAL OR VETERAN STATUS, DISABILITY OR MEDICAL CONDITIONS, OR ANY OTHER BASIS PROHIBITED BY LAW.

UNIVERSAL ATHLETIC

912 N. 7th Avenue BOZEMAN, MT 59715 PHONE: (406) 587-4415 FAX: (406) 587-0228

WWW.UNIVERSALATHLETIC.COM

NAME:							_	
ADDRESS:								
CITY/STATE:							_	
ZIP/POSTAL (CODE:			_			_	
HOME PHON						_		
POSITION(S)	YOU ARE APP	LYING FOR						
APPLICATION	N DATE			DATE AVAILA	BLE TO STAF	RT WORK?		-
HOURS/PERI	OD OF TIME Y	OU ARE AVAIL	ABLE TO WO	PRK?				
MON	TUES	WEDS	THURS	FRI	SAT	SUN	-	
FULL TIME	PART TIME	TEMPORARY	SEASONAL	OTHER:				
HAVE YOU BE	EN CONVICTE	O OF A FELONY	IN THE PAST	5 YEARS?	YES	NO		
IF YES, PLEAS	SE EXPLAIN							
SUCH A CONVIC	TION WILL NOT N	NECESSARILY DISC	QUALIFY YOU FO	R THE POSITION Y	OU ARE APPLY	ING FOR		r
HAVE YOU EVER	R FILED AN APPLIC	CATION WITH US	BEFORE?	YES	NO) IF YES, GIVE DA	TE:	
HAVE YOU EVER	R BEEN EMPLOYE	O WITH US BEFOR	RE?	YES) IF YES, LAST DA	TE WORKED:	
HOW DID YOU H	HEAR ABOUT THIS	COMPANY?						
ARE YOU UNDE	R 16 YEARS OF AG	GE? YES	NO	IF SO, DO YOU HA	AVE A VALID W	ORK PERMIT?	YES	NO
ARE YOU LEGAL	LY ELIGIBLE TO BE	EMPLOYED IN T	HE UNITED STAT	TES?	YES	NO		
ARE YOU WILLIN	NG TO RELOCATE	NOW?	YES	NO	IN THE FUTURI	≣?	YES	NO
ARE YOU CURRE	ENTLY OR DO YOU	EXPECT THE BE	ENGAGED IN AN	Y OTHER BUSINES	S OR EMPLOYN	MENT?	YES	NO
IF YES, GIVE DET	TAILS							
ARE YOU CURRE	ENTLY ON LAY-OF	F?	YES	NO				
IF SO, ARE YOU	SUBJECT TO RECA	ALL?	YES	NO				

EMPLOYMENT HISTORY

MAY WE CONTACT YOUR EMPLOYER?

PLEASE LIST YOUR PRESENT, OR MOST RECENT JOB FIRST ARE YOU PRESENTLY EMPLOYED? YES NO IF PRESENTLY EMPLOYED, WHY ARE YOU CONSIDERING LEAVING? NAME OF EMPLOYER SUPERVISOR: NAME & TITLE DATES OF EMPLOYMENT FROM TO SALARY OR HOURLY RATE WHEN YOU STARTED AND WHEN YOU LEFT TO COMPLETE ADDRESS PHONE # LAST JOB TITLE REASON FOR LEAVING (PLEASE BE SPECIFIC) LIST THE JOBS YOU HELD, DUTIES PERFORMED, SKILLS USED OR LEARNED, ADVANCEMENTS OR PROMOTIONS WHILE YOU WORKED AT THIS COMPANY: YES NO | MAY WE CONTACT YOUR EMPLOYER? NAME OF EMPLOYER SUPERVISOR: NAME & TITLE DATES OF EMPLOYMENT FROM TO SALARY OR HOURLY RATE WHEN YOU STARTED AND WHEN YOU LEFT FROM TO COMPLETE ADDRESS PHONE # LAST JOB TITLE REASON FOR LEAVING (PLEASE BE SPECIFIC) LIST THE JOBS YOU HELD, DUTIES PERFORMED, SKILLS USED OR LEARNED, ADVANCEMENTS OR PROMOTIONS WHILE YOU WORKED AT THIS COMPANY:

YES |

NO

NAME OF EMPLOYER
SUPERVISOR: NAME & TITLE
DATES OF EMPLOYMENT
FROM TO
SALARY OR HOURLY RATE WHEN YOU STARTED AND WHEN YOU LEFT
FROM TO
COMPLETE ADDRESS
PHONE #
LAST JOB TITLE
REASON FOR LEAVING (PLEASE BE SPECIFIC)
LIST THE JOBS YOU HELD, DUTIES PERFORMED, SKILLS USED OR LEARNED, ADVANCEMENTS OR PROMOTIONS WHILE YOU WORKED AT THIS COMPANY:
MAY WE CONTACT YOUR EMPLOYER? YES NO
NAME OF EMPLOYER
SUPERVISOR: NAME & TITLE
DATES OF EMPLOYMENT
FROM TO
SALARY OR HOURLY RATE WHEN YOU STARTED AND WHEN YOU LEFT
FROM TO
COMPLETE ADDRESS
PHONE #
LAST JOB TITLE
REASON FOR LEAVING (PLEASE BE SPECIFIC)
LIST THE JOBS YOU HELD, DUTIES PERFORMED, SKILLS USED OR LEARNED, ADVANCEMENTS OR PROMOTIONS WHILE YOU WORKED AT THIS COMPANY:

MILITARY SERVICE

BRANCH OF SERVICE					
RANK WHEN YOU ENTERED SERVICE WHEN YOU LEFT					
COURSES OF STUDY					
MAJOR RESPONSIBILITIES					
NON-COMPAN	Y EXPERIENCE/VOLU	JNTEER WORK			
	ANY CLUBS, ASSOCIATIONS, AND OTHER				
	VEVER, PLEASE DO NOT INCLUDE NAMES AL ORIGIN, OR SEX - FOR SUCH ORGANIZ/		GEST		
THE ORGANIZATION'S NAME.	AL UNIGIN, ON SEA - I ON SOCIT ONGAINE	ATIONS OSE AIN A INTERCE OF			
ORGANIZATION NAME					
ACTIVITY					
STRENGTHS & CONTRIBUTIONS					
	·				
ORGANIZATION NAME					
ACTIVITY					
STRENGTHS & CONTRIBUTIONS					
COLICATION					
EDUCATION					
	NAME OF SCHOOL, CITY AND STATE	NO. YEARS COMPLETED	MAJOR OR DEGREE		
HIGH SCHOOL					
TRADE OR TECH SCHOOL					
COLLEGE (UNDERGRAD)					
COLLEGE (POSTGRAD)					
SEMINARS/WORKSHOPS					
SELF-TAUGHT EDUCATION					
SUMMARY STATEM	IENT				
	OUR PROFESSIONAL GROWTH THUS FAR AND YOUR FUTURE YOU ARE ESPECIALLUY SUITED FOR THIS POSITION.				

PRE-EMPLOYMENT STATEMENT

I give my permission to this company (or this company's agent) to seek and obtain job-related information concerning my previous employment from previous employers and any references listed or attached. I give my permission to my previous employers, and any references listed or attached, to provide job-related information concerning my employment at their company, except as noted. I release all concerned from any liability in connection therewith. My signature below indicates that I have read, understood, and agreed to the preceding statement and that I have made true, correct, and complete answers and statements on this application and any supplements to it. I understand that my answers and statements will be relied upon by my prospective employer in considering my application for employment, and I understand that any omission or false answer or statement made by me on this application, or on any supplements to it, will be sufficient ground for my discharge or the withdrawal of an employment offer.

APPLICAN [*]	T'S SIGNATURE
	DATE
REFEREN	CES
PLEASE LIST ANY REFE	ERENCES YOU GEEL WOULD BE ABLE TO GIVE INFORMATION PERTINENT TO THIS POSITION (NOT RELATIVES OR EMPLOYERS)
NAME	
ADDRESS	
OCCUPATION	
YEARS KNOW	
PHONE #	
NAME	
ADDRESS	
OCCUPATION	
YEARS KNOW	
PHONE #	
NAME	
ADDRESS	
OCCUPATION	
YEARS KNOW	
PHONE #	