



Describe honors, education, specialized training or volunteer work that is relevant to this job.

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Do you have a current 1st aid certification?  Yes  No  
Do you have a current CPR certification?  Yes  No

### Employment History

Company Name	Kind of business	Address	
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Your Title	Name of Supervisor	Company Phone #	Supervisor Phone # or ext.
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Your Duties	<input type="checkbox"/> I am no longer employed at this company. <input type="checkbox"/> I am currently employed at this company and it is OK to contact my supervisor. <input type="checkbox"/> I am currently employed at this company, please do NOT contact my supervisor.
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Starting Wage \$	Final Wage \$	Reason for leaving?
Start Date ___/___/___	Final Date ___/___/___	

Company Name	Kind of business	Address	
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Start Date ___/___/___	Final Date ___/___/___	

**Employment Application**  
**Walworth County Gymnastics Center**



Applicant's Name \_\_\_\_\_

**Please Read Carefully and Initial**

I certify that the statements given on this application and during an interview are true and complete.  
I authorize investigation of my personal, educational and employment history.  
Any false, incomplete or misleading information given shall result in immediate termination.  
I have read and agree to the above statements. Initial Here

I understand that if I am hired, my continued employment is contingent upon my successful performance during a new hire period of 90 days.  
I have read and agree to the above statements. Initial Here

WCGC's is an AT WILL employer. I understand that if I am hired, my ongoing employment is AT WILL, meaning employment may be terminated by either party at any time with or without reason and with or without notice. I further understand that this AT WILL agreement cannot be changed in any way, except through written notice signed by the President of WCGC.  
I have read and agree to the above statements. Initial Here

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

WCGC is an EQUAL OPPORTUNITY EMPLOYER and does not discriminate against applicants or employees on the basis of race, color, gender, marital status, religion, national origin, age, veteran status, disability or any other basis prohibited by local, state or federal law.

**Authorization for Background Checks**

WCGC's #1 concern is to provide a safe and happy environment for its students and clients. With that in mind, WCGC's performs background checks on employees.

I understand and agree that WCGC will administer background checks on me and that employment is contingent on the results of these checks.

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

**About You**

What qualities do you have that would make you a good fit for WCGC?

**For Office Use Only**

Applicant's Name \_\_\_\_\_

Elkhorn Wisconsin

Date: \_\_\_\_\_

**3 Character References Required before Interview**

Character Reference 1                      Date Received \_\_\_\_/\_\_\_\_/\_\_\_\_

Character Reference 2                      Date Received \_\_\_\_/\_\_\_\_/\_\_\_\_

Character Reference 3                      Date Received \_\_\_\_/\_\_\_\_/\_\_\_\_

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Called for first Interview by \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Interview Date \_\_\_\_/\_\_\_\_/\_\_\_\_                      Time \_\_\_\_\_

Interview with \_\_\_\_\_ Location \_\_\_\_\_

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Shadowed Classes, Entertainment or Secretary

Shadow Date \_\_\_\_/\_\_\_\_/\_\_\_\_                      Time \_\_\_\_\_

Employee Shadowing \_\_\_\_\_ Location \_\_\_\_\_

Shadow form filled out by \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

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Called for 2nd Interview by \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Interview Date \_\_\_\_/\_\_\_\_/\_\_\_\_                      Time \_\_\_\_\_

Interview with \_\_\_\_\_ Location \_\_\_\_\_

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Hired by \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Rate of Pay \$ \_\_\_\_\_ per hour                      Position \_\_\_\_\_

Location \_\_\_\_\_

Paperwork given by \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Paperwork returned on    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

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Please return to Walworth County Gymnastics Center  
213 E. Commerce Ct., Elkhorn, WI 53120  
Phone: 262-743-1224 Fax: 262-743-1724