

# Mountain Life Fitness, LLC

## APPLICATION FOR EMPLOYMENT

DATE OF APPLICATION: \_\_\_\_\_

Name:

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

Address:

\_\_\_\_\_  
Street or PO Box Apt No. City/State Zip

Alternate Address:

\_\_\_\_\_  
Street or PO Box Apt No. City/State Zip

Contact Information:

(\_\_\_\_\_) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Email Home Telephone Mobile Telephone

How did you learn about this position?

\_\_\_\_\_

Available Start Date: \_\_\_\_\_, 2014

Desired Pay Range (Hourly Rate): \$\_\_\_\_\_ to \$\_\_\_\_\_

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

Position(s) Desired:

\_\_\_\_\_

## EDUCATION

Major Name and Location Graduate?? Degree? Subjects of Study/

High



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**PREVIOUS EMPLOYMENT**  
*(Please list from most recent)*

1 .Dates Employed

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Employer Name, Address & Telephone Number

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Role/Title

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Tasks Performed

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Reason for  
Leaving

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2. Dates Employed

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Employer Name, Address & Telephone Number

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Role/Title

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Tasks Performed

---

Reason for  
Leaving

---

3. Dates Employed

---

Employer Name, Address & Telephone Number

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Role/Title

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Tasks Performed

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Reason for Leaving

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4. Dates Employed

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Employer Name, Address & Telephone Number

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Role/Title

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Tasks Performed

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Reason for Leaving

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5. Dates Employed

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Employer Name, Address & Telephone Number

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Role/Title

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Tasks Performed

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Reason for Leaving

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6. Dates Employed

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Employer Name, Address & Telephone Number

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Role/Title

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Tasks Performed

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Reason for



**Other licenses, certifications, or professional organizations:**

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**I agree and consent to having Mountain Life Fitness contact References, current and past**

**employers and do background checks which may require providing my Social Security Number.**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**