

11. **Job Skills:** Use the following space to provide any additional information that you think would be helpful in our evaluation of your job application. This can include specialized training, seminars, workshops, accreditations, special achievements or valuable skills:

12. **Licenses Held:** (including drivers) or certifications to practice a trade or profession.

Type	License Number	Granted by (licensing board)
_____	_____	_____

13. **References:**

List the full name, address, phone number and relationships of up to three persons that you'd like to use as a reference:

Full Name	Address	Phone Number	Relationship
_____	_____	_____	_____
_____	_____	_____	_____

14. **Miscellaneous Information:**

14a. Which shifts are you willing to accept: Day Evening Night Rotating Weekends Specify shift hours _____

14b. Which job status are you willing to accept: Full-time Part-time (specify) _____

14c. If you are under 18 years of age, please list your Mother and Father's Names and cell numbers:

Mother: _____ () _____ - _____ Father: _____ () _____ - _____

15. **Compliance** with the Immigration Reform and Control Act requires that you are you legally eligible for employment in the United States? Yes No.

Please note that under the Immigration Reform and Control Act of 1986, that you may be required to fill out a certification verifying that you are eligible to be employed and verifying your identity. You may also be will be required to provide documentation that you should you be employed.

16. **Veteran Status:** Are you a veteran who received an honorable discharge and has:

1. Provided more than 180 consecutive days of full time active duty in the armed forces of the United States or reserve components, including more than the National Guard?, or

2. Have a military service disability rating fixed by the United States Veterans Affairs?

Yes No. If yes, did you serve during the Vietnam Conflict (2/28/61-3/7/75)? Yes No

17. **Prior Convictions:**

17a. Have you ever been convicted of any violation of law, including moving traffic violations: Yes No

If yes, then please provide the following:

Describe the Offense :

Statute / Ordinance (if known): _____ Date of Charge: _____; Date of Conviction _____

County, City, and State of Conviction: _____

17b. Have you ever been ordered by a court to not work around children? (if Yes, please explain): Yes No _____

18. **Work Start Date:** When will you be available to start work? If you are available as soon as you given two weeks notice, then no dates are necessary.

____ Month ____ Day ____ Year

19. **Job Application Certification:**

I hereby certify that all entries on this job application and any attachments are true and complete. I also agree and understand that any falsification this information may result in my forfeiture of employment. I understand this application is not a guarantee for an interview or position at this company.

I hereby understand that a background check may/will be run before/during employment with Pump It Up.

I understand that all information on this job application is subject to verification and I consent to criminal history and background checks. I also agree that you may contact references and educational institutions listed on this application

Dated _____ Job Applicant Signature _____

Any Additional Information you would like us to know about you, please include on this page:
