

# Fitness Center Student Employee Application

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

Semester: (Fall) (Spring) (Summer)

Name: (last) \_\_\_\_\_ (first) \_\_\_\_\_

Cell Phone #: ( ) \_\_\_\_\_ - \_\_\_\_\_ Home Phone #: ( ) \_\_\_\_\_ - \_\_\_\_\_

Local Address: \_\_\_\_\_ City: \_\_\_\_\_ State: NY Zip: \_\_\_\_\_

Perm Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Are you currently a TC3 student? Y or N FT \_\_\_\_\_ PT \_\_\_\_\_

Major \_\_\_\_\_

Applying for: Work Study \_\_\_\_\_ Non-Work Study \_\_\_\_\_

Do you have any experience in the field of Fitness? Please Share;

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Tell us why you are interested in working for us?

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Put an X by any of the following certifications that you currently possess, followed by their expiration dates;

C.P.R. \_\_\_\_\_; \_\_\_\_/\_\_\_\_/\_\_\_\_ Personal Trainer \_\_\_\_\_; \_\_\_\_/\_\_\_\_/\_\_\_\_

First Aid \_\_\_\_\_; \_\_\_\_/\_\_\_\_/\_\_\_\_ A.E.D \_\_\_\_\_; \_\_\_\_/\_\_\_\_/\_\_\_\_

Other work experience or skills that you possess;

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TIME	M	T	W	Th	F	SAT	SUN
6AM							
7AM							
8AM							
9AM							
10AM							
11AM							
12NOON							
1PM							
2PM							
3PM							
4PM							
5PM							
6PM							
7PM							
8PM							
9PM							
10PM							

PLEASE BLOCK OUT THE TIMES ABOVE THAT YOU HAVE CLASSES OR OTHER COMMITMENTS-LEAVE BLANK THE TIMES YOU ARE AVAILABLE TO WORK!!!

**REFERENCES:** List two persons *not related* to you that can attest to your work experience or volunteer activities:

Name \_\_\_\_\_ Your relationship \_\_\_\_\_  
 Title \_\_\_\_\_ Phone# \_\_\_\_\_

Name \_\_\_\_\_ Your relationship \_\_\_\_\_  
 Title \_\_\_\_\_ Phone# \_\_\_\_\_

**I attest that all the information on this application is truthful and accurate. I understand any discrepancies or inaccurate information may result in either not being hired or termination after the fact. I have read and understand this declaration.**

**SIGNATURE:** \_\_\_\_\_ **DATE** \_\_\_\_\_