## Island Rock Gym, Inc.

## **Employment Application**

DATE:

DEDCOMAL INTO								
PERSONAL INFO	- RMATION	I						
LAST NAME		FIRST NAME			MIDDLE INITIAL			
STREET ADDRESS								
STREET ADDRESS								
CITY		STATE	ZIP COD	E		SS NUMBER		
HOME PHONE (INCLUDIN	G AREA CODE)			CELL PHONE	INCLUDING AF	REA CODE)		
RELATIVES OR FRIENDS W	ORKING FOR O	OR FORMERLY	EMPLOYED BY	ISLAND ROCK	;			
HAVE YOU EVER BEEN CO		R PLEADED NO		A CRIME WHI	CH WAS NOT A			
YES HAVE YOU EVER SERVED	YES NO OFFENSE:					DATE OF O	FFENSE:	
YES	NO	XI.	BRANCH:			DATE OF S	FR\/ICE·	
ARE YOU A US CITIZEN OF		GAL RIGHT TO		/ITH THE PRO	PER DOCUMEN		LIVICL.	
YES	NO		IMMIGRAT	ION VISA #				
AVAILABILITY								
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AVAILABILITY: PLEAS	SUN.	MON.	TUES.	WED.	THURS.	FRI	SAT	
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EDUCATION AND	2 6 1 1 6							
EDUCATION AND	) SKILLS				I	I	I	
LIST ALL HIGH SCHOO	LS, COLLEGES, U	INIVERSITIES, AN	ND TECHNICAL T	RAINING	YRS COMPLETED	LAST YR ATTENDED	DEG	REE OR CERTIFICATE
LIST SPECIAL SKILLS/TRAIN	NING (COMPU	TER, CLIMBING	i, FIRST AID, ET	C.)				
Do you currently climb, a	nd if so, at wha	it grade (not h	aving climbing	experience w	on't prevent yo	ou from being	hired)?	

EMPLOYMENT HISTORY (STARTING WITH THE MOST COMPANY NAME			DATE START	ED .	DATE ENDED	DATE ENDED	
ADDRESS			PHONE (INC	LUDING AREA CODE)	SUPERVISOR	SUPERVISOR	
JOB TITLE		REASON FOR LEAVING					
JOB RESPONSIBILITES	5						
COMPANY NAME			DATE START	ED.	DATE ENDED	<u> </u>	
COMITANT NAME		DATE STAIN		DATE ENDED	DATE ENDED		
ADDRESS		PHONE (INC	LUDING AREA CODE)	SUPERVISOR	SUPERVISOR		
IOB TITLE			REASON FOR LEAVING				
JOB RESPONSIBILITES	3						
COMPANY NAME			DATE START	ED	DATE ENDED	)	
ADDRESS			PHONE (INCLUDING AREA CODE)		SUPERVISOR	SUPERVISOR	
JOB TITLE			REASON FOR LEAVING				
JOB RESPONSIBILITES	5						
REFERENCES							
FIRST NAME			SHIP	PHONE (INCLUDING	ZIP CODE)	YRS KNOWN	
ADDITIONAL I	INFORMATION						
Have you ever left a p	position on request of your	employer (by being	fired, or by be	eing let go) or asked to re	sign?		
YES	NO						
	THE REASON:						
	orm the <b>essential functions</b> of	-		_	onable		
	s might include, but is not lin	_					
lifting and carrying up	o to 50 pounds at least 100 f	eet, and climbing to	the top of ar	ı Island Rock wall)?			

YES

NO

## LEGAL STUFF AGREED TO BY FILLING OUT AND SIGNING THIS APPLICATION

Applicant hereby certifies that the answers to the foregoing questions are true and correct. I agree if the information is to be found false in any respect including omission of information, I can be subject to dismissal without notice at any time. The applicant understands employer is relying upon applicant's answers and the answers are made as an inducement to employer to hire applicant. I authorize you to investigate all information in this application. I hereby authorize my former employer to release information pertaining to my work record, habits and performance. I authorize Island Rock or its agents to investigate my background, previous employment, educational background, driving record, and reference information including job performance, salary history, employment dates, etc.

Should I become an employee of island rock I understand that my employment will be for no definite term, such that I will enjoy the right to terminate my employment at any time, at my convenience, without cause or reason. I further understand that Island Rock will have the same right. This status can only be modified if such modification is in written by both me and the owner or Island Rock.

I hereby further acknowledge that I am expected to abide by all island rock rules and regulations, written or unwritten, promulgated by Island Rock, its managers or supervisors, but that such rules and regulations do not create a contract between me and Island Rock or otherwise restrict the right of either me or Island Rock to terminate the employment relationship. I understand that these rules and regulations may be subject to change at any time.

I understand that because of the nature of retail operations, Island Rock reserves the right (except where prohibited by law) to conduct inspections of my person, lockers, bags (including purses or briefcases) or parcels brought into or taken out of the store. I understand that refusal to submit to a requested inspection may result (except where prohibited by law) in termination of my employment.

I release Island Rock Gym, Inc, its subsidiaries and current or former employers from any liability resulting from any information provided in connection with this application.

APPLICANT'S SIGNATURE	DATE
IF APPLICANT IS UNDER 18, PARENT/GUARDIAN SIGNATURE	
IF APPLICANT IS UNDER 18, PARENT/GUARDIAN PRINT	

FOR ISLAND ROCK'S USE ONLY - PLEASE DO NOT WRITE BELOW THIS	
INTERVIEW DATE:	
MANAGER WHO INTERVIEWED:	
MANAGER SIGNATURE:	
MANAGER NOTES:	