



Employment Application

425 E 5th St
New Richmond WI 54017
715-246-2252
www.nracentre.com

GENERAL INFORMATION

Date _____

Last Name _____ First Name _____ Middle Name _____

Present Address _____

City _____ State _____ Zip _____

Permanent Address _____

City _____ State _____ Zip _____

Phone Number _____ E-Mail (required) _____

How did you hear of this position? _____ Referred by _____

What prompted you to apply here for employment? _____

Are you presently employed? Yes No If yes, may we contact your present employer? Yes No

Are you authorized to work in the United States? Yes No

Are you under the age of 18? Yes No (If yes, a work permit may be required prior to working.)

Are you under the age of 15? Yes No

Department(s) Desired Fitness Child Care Welcome Center Aquatics Maintenance Other

Position(s) Desired _____

Wages or Salary Expected _____ Date Available _____

How many hours per week are you available to work? If available only seasonally, indicate which seasons:

_____ Full Time (30-40 hrs per week) Seasonal: _____ Winter

_____ Part Time (19-30 hrs per week) _____ Spring

_____ Part Time (10-19 hrs per week) _____ Summer

_____ Part Time (0-10 hrs per week) _____ Fall

Please indicate the hours you are available to work during both days and evenings. (Facility hours vary between 5:00 AM - 10:00 PM):

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

EDUCATION HISTORY

School Name	City & State	Major Course or Subject	Start & End Date		Graduated		Degree
					Yes	No	
High School			NA	NA			
Technical School							
College							
List any other education, training, and certifications you have.							

EMPLOYMENT HISTORY

Starting with present or most recent, list all previous employers. Include self-employment and summer and part-time jobs. If more space is required, please continue on a separate sheet. You may attach a resume, but complete this application as well.

Employer	Phone Number		
Street Address	City	State	Zip
Job Title	Supervisor Name and Title		
Dates Worked From	To	Salary Starting	Final
Reason for leaving			
Describe duties			

Employer	Phone Number		
Street Address	City	State	Zip
Job Title	Supervisor Name and Title		
Dates Worked From	To	Salary Starting	Final
Reason for leaving			
Describe duties			

Employer	Phone Number		
Street Address	City	State	Zip
Job Title	Supervisor Name and Title		
Dates Worked From	To	Salary Starting	Final
Reason for leaving			
Describe duties			

VOLUNTEER EXPERIENCE

Where	Phone Number		
Address	City	State	Zip
Dates Volunteered From	To	Contact Name	
Describe duties			

REFERENCES

Please include **two personal references** who have known you for at least three years. Include one relative.

Name	Address	Phone Number	Relationship	Years Known

Please include **two professional references**. Do not include relatives.

Name	Address	Phone Number	Relationship	Years Known

Have you ever been convicted of a felony? Yes No

Have you been convicted of a misdemeanor committed within the past 5 years, or were you imprisoned for a misdemeanor which occurred more than 5 years ago? Yes No

Have you been convicted of a crime against a child? Yes No

If "yes" to any of the above, please list explanation below. This information will not necessarily bar an applicant from employment.

Employment with the Centre will be contingent on satisfactory clearance of criminal history records of convictions. A conviction does not serve as an automatic bar to employment.

I understand that employment at this company is "at will," which means that either I or the Centre can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued at that basis. I understand that no supervisor, manager or executive of the company, other than the president in a signed written document, has any authority to alter the foregoing.

Signature _____ Date _____

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts may result in dismissal. Further, I understand and agree that my employment is for no definite period, and may, regardless of the day of payment of my wages and salary, be terminated at any time, with or without cause, and with or without prior notice.

Signature _____ Date _____

New Richmond Area Centre, Ltd. is an EOE/Affirmative Action Employer