

Heartline Fitness Products, Inc.

Applications can be downloaded and emailed back to sales@heartlinefitness.com ; copied and faxed to: 301-330-5479; or mailed to: Heartline Fitness, 19209 Orbit Drive, Gaithersburg, MD 20979

For questions or more information call: 301-921-0661

Today's Date: _____ SS# _____

Name: _____

Street: _____

City: _____ State: _____ Zip Code: _____

E-mail: _____ Home Phone (____) _____

Cell Phone (____) _____ Emergency Phone (____) _____

Emergency Name _____ Relation _____

Valid Driver's License? Yes _____ No _____ State _____ # _____ CDL Yes _____ No _____

Are you legally eligible for employment in the U.S.A.? Yes _____ No _____ (If so, verification required)

Do you have the required working papers? _____ (Needed on or before the first day of work)

Did we ever employ you? _____ If so, when? _____

Have you ever worked in the Fitness Industry? _____ If so, where? _____

How did you hear about the position you are applying for? _____

TYPE OF WORK DESIRED: Full Time: _____ Part Time: _____ Both: _____

IN WHAT AREA: Office: _____ Sales: _____ Service: _____ Delivery/Install: _____

Why do you feel you qualify for this/these jobs? _____

Do you know anyone who works for Heartline Fitness? _____

For Service Technician applicants – Do you have your own tools? _____

Days Available (Circle) M T W Th F

Hours Available: _____

If there is a day or time when you are definitely unavailable, please indicate here: _____

Have you ever been convicted of a crime? _____ If so, describe in full: _____

EDUCATION

SPECIAL SKILLS AND QUALIFICATIONS: List job-related licenses, skills, training, honors, awards,

Special accomplishments & acquired skills: _____

EMPLOYMENT HISTORY:

School	Name & Address	Years Completed	Did you Graduate?	Degree & Field
High School				
College				
Other				

Employer & Address: _____

Supervisor: _____ Phone: _____

Position Title: _____ from: _____ to: _____

Describe the work you did: _____

Salary: _____ Reason for leaving: _____

Employer & Address: _____

Supervisor: _____ Phone: _____

Position Title: _____ from: _____ to: _____

Describe the work you did: _____

Salary: _____ Reason for leaving: _____

Employer & Address: _____

Supervisor: _____ Phone: _____

Position Title: _____ from: _____ To: _____

Describe the work you did: _____

Salary: _____ Reason for leaving: _____

I HEREBY GIVE PERMISSION TO CONTACT THE EMPLOYERS LISTED ABOVE CONCERNING MY
Prior Work Experience. Yes: _____ No: _____

If you do not want us to contact your present employer, please indicate here: _____

Please Read:

The facts set forth in my application for employment are true and complete. I understand that if employed, any false statement on this application may result in my dismissal. I also understand that this application is not intended to be a contract of employment. Furthermore, this application does not obligate the employer in any way if the employer decides to employ me. You are hereby authorized to make any investigation of my personal history and financial and

credit record through any investigative agencies, credit agencies, or bureaus of your choice. I understand that I have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of any investigative report that is made.

Personal References: (Not former employers or relative) 2 or 3

Name & Occupation	Address	Phone number