



# CHOICE HEALTH & FITNESS

Grand Forks Park District

## APPLICATION FOR EMPLOYMENT



The Grand Forks Park District may request a background check on all individuals who are offered employment by the Park District. The Fair Credit Reporting Act (1971) requires that we inform you that a background investigation may be conducted as part of our employment screening and selection process. This may include an inquiry to obtain information regarding your character, criminal history, general reputation, personal characteristics, credit report and mode of living. The main objective of this investigation is to verify information you provide on your application or during the interview process. If a report is made, you have the right to request details of the report from the consumer reporting agency.

◆ SEPARATE APPLICATION MUST BE COMPLETED FOR EACH POSITION APPLIED FOR ◆ PLEASE PRINT ◆ MUST COMPLETE IN FULL

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

Position for which you are applying for: \_\_\_\_\_ ☐ Full-Time ☐ Part-Time ☐ Seasonal

### Positions Available (SELECT ONLY ONE)

Business Office Associate ~ Customer Service Associate ~ Membership Associate  
~ Birthday Party Associate ~ Child Care Associate ~ Facility Maintenance Associate ~ Fitness Associate ~ Personal Trainer  
~ Group Cycling Instructor ~ Group Fitness Instructor ~ Yoga Instructor ~ Aquatics Instructor / Lifeguard  
~ Sports & Recreation Associate ~ Sports Enhancement Associate ~ Basketball Instructor ~ Racquetball Instructor  
~ Racquetball Professional ~ Volleyball Instructor ~ Tennis Instructor ~ Tennis Professional

### PART I - PERSONAL

Name \_\_\_\_\_ Are you 18 years or older? YES NO Are you a U.S. Citizen? YES NO  
Address \_\_\_\_\_ City, State \_\_\_\_\_ Zip \_\_\_\_\_  
Daytime Phone ( ) \_\_\_\_\_ Evening Phone ( ) \_\_\_\_\_ E-Mail \_\_\_\_\_  
Have you worked for us before? YES NO When? \_\_\_\_\_ Position Held? \_\_\_\_\_

### PART II - EDUCATIONAL PREPARATION: (High School, College/Trade School)

Name of School, City, State	Course of Study	Degree	Date of Graduation
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

### PART III - WORK EXPERIENCE: (List last two jobs held, including your current one)

Company _____	Phone ( ) _____	Supervisor _____
May we Contact? YES NO	If no, why? _____	Reason for leaving _____
Briefly describe work performed: _____		
Company _____	Phone ( ) _____	Supervisor _____
May we Contact? YES NO	If no, why? _____	Reason for leaving _____
Briefly describe work performed: _____		

### PART IV - EQUIPMENT/MACHINES OPERATED:

**PART V - OTHER EXPERIENCE/TRAINING, LICENSES/CERTIFICATES:** list any special qualifications relevant to the position for which you are applying and are not covered elsewhere in your application (such as technical skills and/or computer, childcare training, CPR, First Aid, WSI, etc.) For licenses and certificates you must include date and place of issuance, date of expiration and be able to present a copy of certification if hired. (Attached page is needed.)

---

**PART VI - REFERENCES** (persons who can speak of your job/professional qualifications):

Name \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_ Relationship \_\_\_\_\_  
Address \_\_\_\_\_ City, State \_\_\_\_\_ Zip \_\_\_\_\_  
Name \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_ Relationship \_\_\_\_\_  
Address \_\_\_\_\_ City, State \_\_\_\_\_ Zip \_\_\_\_\_

---

**PART VII - GENERAL INFORMATION:**

If hired, when could you start here? \_\_\_\_\_ Are you available to work on weekends/holidays? \_\_\_\_\_

Are/Were you in Armed Forces? \_\_\_\_\_ If yes, what branch? \_\_\_\_\_

**For driving positions only -** Driver's License? YES NO If so, please list ID #: \_\_\_\_\_ State \_\_\_\_\_

Class of License: \_\_\_\_\_ Has license been suspended or revoked in the last three years? YES NO

If yes, give details: \_\_\_\_\_

Have you been convicted of a felony within the last five years? YES NO

If yes, answer the following: State Charged: \_\_\_\_\_ County where charged: \_\_\_\_\_

Charge took place in : \_\_\_\_\_ FEDERAL COURT \_\_\_\_\_ STATE COURT Explain: \_\_\_\_\_

Have you ever been convicted of any offense involving a crime against a child including, but not limited to, the sexual molestation physical or sexual abuse, or rape of a child? YES NO

If yes, answer the following: State Charged: \_\_\_\_\_ County where charged: \_\_\_\_\_

Charge took place in : \_\_\_\_\_ FEDERAL COURT \_\_\_\_\_ STATE COURT Explain: \_\_\_\_\_

*(Conviction of a crime is not an automatic bar to employment. The Park District will consider the nature of the offense, the date of offense and the relationship between the offense and the position for which you are applying.)*

---

**PART VIII - AUTHORIZATION:**

I CERTIFY THAT ALL FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND AND AGREE THAT ANY MISSTATEMENT WILL BE GROUNDS FOR DISQUALIFICATION OR DISMISSAL FROM EMPLOYMENT BY THE GRAND FORKS PARK DISTRICT.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES AND EMPLOYERS LISTED TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, TO INCLUDE A BACKGROUND CHECK INTO FELONY CONVICTIONS AND CHILD NEGLECT OR ABUSE AND RELEASE THE GRAND FORKS PARK DISTRICT OF ANY LIABILITY AND ANY DAMAGE THAT MAY RESULT FROM UTILIZATION OF SUCH INFORMATION.

I UNDERSTAND BY PROVIDING INFORMATION ON THIS APPLICATION THAT THERE IS NO CONTRACTUAL OR IMPLIED AGREEMENT BETWEEN MYSELF AND THE GRAND FORKS PARK DISTRICT.

X  
\_\_\_\_\_  
Applicant Signature

X  
\_\_\_\_\_  
Date

---

**Complete & Return Application To:****CHoice Health & Fitness**

PO Box 12429  
4401 S. 11th St.  
Grand Forks, ND 58208-2429

**EQUAL OPPORTUNITY EMPLOYER**

---

**Questions? Need Further Information?**

**Websites:** [www.choicehf.com](http://www.choicehf.com)  
[www.gfparks.org](http://www.gfparks.org)

**E-mail:** [info@choicehf.com](mailto:info@choicehf.com)

**Phone:** (701) 746-2790 **Fax:** (701) 746-2793