



APPLICATION FOR EMPLOYMENT

Note: This application is valid for 60 days. If you wish to be considered for employment after this 60-day period, a new application must be completed.

PERSONAL INFORMATION:

Date: _____

Name: _____ SS #: _____

Present address: _____ City: _____ State: _____ Zip: _____

Permanent address: _____ City: _____ State: _____ Zip: _____

Phone number: _____ Alternate phone number: _____

Are you 16 years or older? Yes ___ No ___ E-Mail address: _____

In order to permit a check of your work and education records, are there any other names that you have previously used? Yes ___ No ___ If yes, identify names and relevant dates: _____

EMPLOYMENT DESIRED:

Position: _____ Date you can start: _____ Salary desired: _____

Are you employed now? _____ If so may we contact your present employer? _____

If "No", please explain reason: _____

Have you ever applied with BGI before? ___ If so, which location? _____ When? _____

Please indicate your hours of availability:

Example: Mon 8a-5p Tues All Day Wed None

Mon _____ Tues _____ Wed _____ Thurs _____ Fri _____ Sat _____ Sun _____

Number of hours you wish to work per week: _____ Referred by: _____

(Note: BGI will not guarantee any number of hours per week or a specific schedule)

OTHER:

Have you ever been convicted of a crime in any state (including felonies, misdemeanors, guilty pleas, or pleas of nolo contendere), other than minor traffic offenses: _____

If so, please explain _____

Note: A prior conviction will not necessarily bar you from employment; however the type of conviction and when it occurred will be considered.

If hired, would you be able to perform all functions and all necessary job assignments of the particular job for which you are applying? Yes ___ No ___ If "No", please explain: _____

EDUCATION:	Name and Location of School	# of Yrs Attended	Did you graduate?	Subjects Studied/ Degree
Grammar School				
High School				
College				
Trade or Business				

GENERAL:

Subjects of special study or research work: _____

Military or Naval Service: _____ Rank: _____ Dates of service: _____

Present membership in National Guard or Reserves: _____

FORMER EMPLOYERS: Please give an accurate, complete full-time and part-time employment record for your past four positions. Start with your current employer (or most recent employer if not employed) and account for any periods of unemployment. Use a separate sheet if necessary.

Dates/Month and Year	Employer's Name, Address and Phone Number	Position and Supervisor	Salary	Reason for leaving
From:				
To:				
From:				
To:				
From:				
To:				
From:				
To:				

Except for vacations and holidays, how many work days were you absent during the past calendar year?

0-5 days _____ 6-10 days _____ 11-15 days _____ 16-20 days _____ 21+ days _____

REFERENCES: Give the names of three persons not related to you, whom you have known at least one year.

Name	Address	Relationship to You	Phone	Years Acquainted

SERVICE DEPARTMENT SUPPLEMENT: (Service applicants only)

Please indicate your ability to perform the following tasks, **WITHOUT SUPERVISION OR ASSISTANCE**, by answering the questions with a yes or no answer.

Can you adjust: Headsets? _____ Hubs? _____ Bottom Brackets? _____ Pedals? _____

Can you overhaul: Headsets? _____ Hubs? _____ Bottom Brackets? _____ Pedals? _____

Can you install tires and tubes? _____ Can you install tubular tires? _____

Can you size and install a chain? _____ Do you know how to check a chain for wear? _____

Do you know how to adjust the limit screws on derailleurs? _____

Do you know how to adjust indexed derailleurs? _____

Can you install a cable in or overhaul a Gripshift shifter? _____

Can you install road bike brake lever/shifters (STI, Ergo)? _____

Can you true wheels? _____ Can you build wheels? _____

Can you replace spokes and find the proper length? _____

Can you overhaul spring/elastomer suspension forks? _____ Can you overhaul air/oil suspension forks? _____

OTHER SPECIAL SKILLS AND ABILITIES: (All applicants)

CERTIFICATION: (All applicants)

I hereby authorize the release of any employment data relevant to my employment with Bicycle Garage Indy/BGI Fitness for the purpose of a bonafide credit and employment investigation. I authorize a thorough investigation of my past employment, activities, and background and agree to cooperate in such investigation, and release from all liability or responsibility all persons and corporations requesting or supplying such information. This investigation shall also include a determination regarding whether I have a criminal record.

I fully understand that if employed, any misrepresentation or omission on this application will result in dismissal, regardless of the date of discovery. Employment may also be subject to my passing a medical examination as required by the Personal Policies of Bicycle Garage Indy/BGI Fitness, and to a satisfactory review of my references.

Neither the Application nor any statement made to me during the hiring process or thereafter shall be considered a contract of employment of any kind. Where such a contact is intended, I understand that it will be separately entered into and signed by the President of the Company. Absent such a contract, I understand that, if hired, my employment will be termination-at-will, with or without cause or notice, that I may not be employed for any specified or definite period of time, and that this application is not and is not intended to be a contract, statement, or confirmation of continued employment. The Company may alter, modify, amend, or terminate any of its policies and benefits, both as to active and retired employees.

Signature: _____

Date: _____