



Progressive Fitness, LLP

Independent Contractor Application

GENERAL INFORMATION			
Name:			
Last	First	MI	
Street Address:		City:	State: Zip:
Home Phone:		Cell Phone:	
Work Phone:		Are you 18 years or older?: Yes _____ No _____	
E-Mail:		<i>The Age Discrimination Employment Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 but less than 70 years of age.</i>	
Are you authorized to work in the U.S.? Yes _____ No _____		Have you ever been convicted of a Felony or Misdemeanor? Yes _____ No _____ <i>You will not be denied employment solely because of a conviction record unless the offense is related to the position for which you have applied.</i>	
POSITION RELATED REQUIREMENTS			
What hours are you available?			
Are you available weekends?		Are you available holidays?	
Date available for work?			
Do you have reliable transportation?			
EMPLOYMENT STATUS			
Are you currently employed? _____ If "yes", how many jobs do you currently hold _____			
Is your intent to continue in your current job(s) if you work for Progressive Fitness, LLP? _____			
Are you currently a student? (or planning to go to school within the next 6 months?) _____			
If yes, what impact does this have on your availability for work?			

EDUCATION (list school name/year graduated/ or years attended/major subject/degree attained, if any)
High School
Junior College
College/University
Trade School/Technical College
Any other education/training that is helpful for this position:

CERTIFICATIONS (list the certification and year attained)

MILITARY SERVICE	
Branch	Rank
Dates Served	
Are you a current member of The National Guard or Reserves?	

EMPLOYMENT HISTORY			
List below last five employers starting with the most recent first			
Date (Month/Year) From/To	Name/Address of Employer	Position	Wage/Salary
Reason for Leaving			
Supervisor		Phone	

Date (Month/Year) From/To	Name/Address of Employer	Position	Wage/Salary
Reason for Leaving			
Supervisor		Phone	

Date (Month/Year) From/To	Name/Address of Employer	Position	Wage/Salary
Reason for Leaving			
Supervisor		Phone	

Date (Month/Year) From/To	Name/Address of Employer	Position	Wage/Salary
Reason for Leaving			
Supervisor		Phone	

Date (Month/Year) From/To	Name/Address of Employer	Position	Wage/Salary
Reason for Leaving			
Supervisor		Phone	

REFERENCES
Please list three personal references, not related to you, whom you have known for at least one year:

	Name	Phone	Relationship
1			
2			
3			

OTHER INFORMATION

APPLICANT CERTIFICATION

I certify that all of the statements made in this application are true and correct to the best of my knowledge and belief and are made in good faith. I give Progressive Fitness, LLP and its agents the right to investigate all information given and to secure additional information, if necessary. I hereby release from all liability or responsibility all persons, companies, corporations furnishing such information.

I further understand that the completion of this application does not assure me of a position with Progressive Fitness, LLP and does not obligate the company to me in any way.

If I am chosen as an independent contractor, I acknowledge that there is no specified length of time for my position and that this application does not constitute an agreement or contract. Accordingly, either I or Progressive Fitness, LLP can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I further understand that this application will be retained for active consideration for six (6) months following date of submission. To remain in consideration for an independent contractor position after that time, it will be necessary that I complete another application.

I further understand that any misleading or incorrect statement or failure to complete any part of this application not prohibited by law may render this application void and if a current contractor would be cause for immediate discharge.

I further agree to sign an independent contractor agreement and a non-compete agreement.

I represent and warrant that I have read and fully understand the foregoing, and that I seek a position under these conditions.

Print Name

Signature

Date

It is Progressive Fitness LLP's policy that all independent contractor position decisions are based solely on the qualifications of the individual and the needs of Progressive Fitness, LLP and are done so without regard to race, religion, color, creed, national origin, sex, marital status, disability, citizenship, or veteran status.

Mail Application to:
Progressive Fitness, LLP
12442 S. 81st Avenue
Papillion, NE 68046