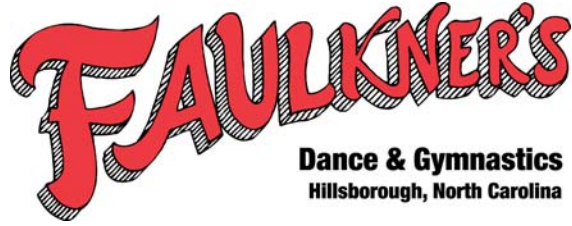


APPLICATION FOR EMPLOYMENT AT



POSITION APPLYING FOR: _____

DATE: _____ PART TIME FULL TIME

AVAILABILITY TO WORK

Please check if you are available to work.

MONDAY; WHAT TIME CAN YOU START: _____

TUESDAY; WHAT TIME CAN YOU START: _____

WEDNESDAY; WHAT TIME CAN YOU START: _____

THURSDAY; WHAT TIME CAN YOU START: _____

FRIDAY; WHAT TIME CAN YOU START: _____

WHAT AFTERNOONS AND NIGHTS ARE YOU NOT AVAILABLE: _____

HOW DID YOU HEAR OF EMPLOYMENT AT FAULKNER'S DANCE & GYMNASTICS?

PERSONAL

NAME: _____

TELEPHONE: HOME: _____ OTHER: _____

PRESENT ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES NO

IF YES, PLEASE EXPLAIN AND GIVE DATES:

IF HIRED, DO YOU HAVE RELIABLE TRANSPORTATION TO GET TO WORK? YES NO

ARE YOU AT LEAST 18 YEARS OF AGE? YES NO

LIST ANY FRIENDS OR FAMILY WHO CURRENTLY WORK FOR FAULKNER'S:

CITIZENSHIP

CAN YOU, AFTER EMPLOYMENT, SUBMIT A BIRTH CERTIFICATE, OR OTHER PROOF OF U.S. CITIZENSHIP, OR DOCUMENTS VERIFYING YOUR RIGHT TO WORK IN THE UNITED STATES? YES NO

EDUCATION

HIGH SCHOOL: _____ GRADUATED: YES NO

COLLEGE: _____ GRADUATED: YES NO

OTHER SCHOOL: _____ GRADUATED: YES NO

EMPLOYMENT HISTORY

HAVE YOU EVER BEEN FIRED (OR ASKED TO RESIGN) BY AN EMPLOYER? YES NO

IF YES, SUPPLY DETAILS:

| EMPLOYER | DATES | POSITION & DUTIES | STILL EMPLOYED | |
|----------|-------|-------------------|----------------|----|
| | | | YES | NO |
| | | | YES | NO |
| | | | YES | NO |
| | | | YES | NO |
| | | | YES | NO |

PERSONAL REFERENCES

| NAME | ADDRESS | PHONE # |
|------|---------|---------|
|------|---------|---------|

ARE YOU COMFORTABLE WITH FAULKNER'S DANCE & GYMNASTICS RUNNING A BACKGROUND CHECK ON YOU? YES NO

PLEASE READ CAREFULLY

I ACKNOWLEDGE THAT, IN CONNECTION WITH MY APPLICATION, ASSIGNMENT OR PROMOTION WITH FAULKNER'S DANCE & GYMNASTICS. I HAVE BEEN ADVISED IN WRITING THAT AN INVESTIGATIVE CONSUMER REPORT MAY BE AS TO MY CHARACTER, GENERAL REPUTATION, PERSONAL CHARACTERISTICS AND MODE OF LIVING. I FURTHER ACKNOWLEDGE THAT I HAVE BEEN ADVISED IN WRITING BY FAULKNER'S DANCE 7 GYMNASTICS THAT, UPON WRITTEN REQUEST, WITHIN A REASONABLE TIME, ADDITIONAL INFORMATION AS TO THE NATURE AND SCOPE OF THE REPORT. THIS WRITTEN REQUEST SHOULD BE ADDRESSED TO FAULKNER'S WHERE THE APPLICATION IS FILED.

I hereby authorize all personnel, schools, companies, corporations, credit bureaus and law enforcement agencies to supply any and all information concerning my qualifications for the position applied for and release the same from any liability resulting from providing such information. I also acknowledge that, from time to time, Faulkner's Dance & Gymnastics may be required to submit certain information with regard to my employment or application to the various state and federal government agencies. I hereby authorize Faulkner's Dance & Gymnastics to provide such information and release the company, its agents, assigns and subsidiaries from any liability resulting from submitting such information. I acknowledge that I meet minimum age requirements for employment set by Federal and State Laws.

I hereby certify that all the statements and answers set forth on this application from are complete and true, and I understand that if, subsequent to employment, any of such statements and answers are found false that the information has been omitted, such false statements or omissions will be just cause for the termination of my employment at Faulkner's Dance & Gymnastics. I acknowledge Faulkner's Dance & Gymnastics is an equal opportunity employer and my application will be considered based upon my qualifications only.

Signature of Applicant: _____ Date: _____

Signature of Faulkner's Dance & Gymnastics: _____ Date: _____