

Staffing needs may vary per store. Please indicate your top three City Sports locations (Circle 1-3, one being your first choice)



- 1815 Mass. Ave. Cambridge, MA 02138 (617) 661-1666
- 1035 Comm. Ave. Boston, MA 02215 (617) 782-5121
- 11 Bromfield St. Boston, MA 02108 (617) 423-2015
- 44 Brattle Street Cambridge, MA 02138 (617) 492-6000
- 1111 19th St. NW Washington, DC 20009 (202) 467-4100
- 51 St. Georges Road Suburban Square Ardmore, PA 19003 (610) 649-7497
- Harbor East 809 Aliceann Street Baltimore MD, 21202 (888) 837-4420
- 5th and 36th 395th Avenue New York, NY 10018 (877) 695-0171
- 37 Boylston St. Chestnut Hill, MA 02167 (617) 566-0220
- 480 Boylston St. Boston, MA 02116 (617) 267-3900
- 1608 Walnut Street Philadelphia, PA 19103 (215) 985-5860
- 715 7th St. NW Washington, DC 20031 (202) 638-3115
- 271 Thayer Street Providence, RI 02906 (401) 521-6555
- Atlantic Station 261 19th St NW Suite 1160 Atlanta, Georgia 30318 (404) 541-1100

PLEASE COMPLETE ALL REQUESTED INFORMATION. USE INK AND PRINT.

PERSONAL INFORMATION

TODAYS DATE:			DATE AVAILABLE FOR WORK						
NAME (LAST FIRST MIDDLE)		FULL TIME <input type="checkbox"/> 30-40 HRS. PER WEEK PART TIME <input type="checkbox"/> 0-20 HRS. PER WEEK SEASONAL <input type="checkbox"/> HOLIDAY SUMMER <input type="checkbox"/>							
STREET ADDRESS			AGE: ARE YOU AT LEAST 18 YEARS OLD? YES <input type="checkbox"/> NO <input type="checkbox"/> <small>IF YOU ARE UNDER 18, YOU MAY BE REQUIRED TO PROVIDE A WORK PERMIT PRIOR TO WORKING.</small>						
CITY STATE ZIP			ARE YOU AT LEAST 16 YEARS OLD? YES <input type="checkbox"/> NO <input type="checkbox"/>						
EMAIL			PLEASE INDICATE THE HOURS YOU ARE AVAILABLE TO WORK						
PHONE-HOME PHONE-CELL			SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
<small>NOTE: SHOULD YOUR AVAILABILITY CHANGE, IT IS YOUR RESPONSIBILITY TO NOTIFY YOUR SUPERVISOR.</small>									

WHERE HAVE YOU WORKED BEFORE ?

LIST YOUR PREVIOUS EXPERIENCE BEGINNING WITH YOUR MOST RECENT POSITION

1	EMPLOYER		DATES OF EMPLOYMENT			
			START: MONTH	YEAR	END: MONTH	YEAR
	ADDRESS		STREET		CITY	STATE ZIP
	PHONE	SUPERVISOR		NAME / TITLE		
	DUTIES		REASON FOR LEAVING			
2	EMPLOYER		DATES OF EMPLOYMENT			
			START: MONTH	YEAR	END: MONTH	YEAR
	ADDRESS		STREET		CITY	STATE ZIP
	PHONE	SUPERVISOR		NAME / TITLE		
	DUTIES		REASON FOR LEAVING			
3	EMPLOYER		DATES OF EMPLOYMENT			
			START: MONTH	YEAR	END: MONTH	YEAR
	ADDRESS		STREET		CITY	STATE ZIP
	PHONE	SUPERVISOR		NAME / TITLE		
	DUTIES		REASON FOR LEAVING			

HAVE YOU EVER WORKED AT A CITY SPORTS BEFORE? _____

MAY WE CONTACT CURRENT EMPLOYER? _____

EDUCATION AND TRAINING

SCHOOL	PLEASE PRINT NAME, STREET, CITY, STATE & ZIP CODE FOR EACH SCHOOL	NUMBER OF YEARS COMPLETED	DEGREE?
COLLEGE			
HIGH SCHOOL			
ADDITIONAL TRAINING			

FOREIGN LANGUAGES _____ SPOKEN FLUENTLY _____

MORE ABOUT YOUR EMPLOYMENT HISTORY

HAVE YOU EVER BEEN DISMISSED OR FORCED TO RESIGN FROM ANY EMPLOYMENT?

YES NO IF YES, PLEASE EXPLAIN: _____

HAVE YOU EVER BEEN CONVICTED OF A FELONY CRIME OR THEFT-RELATED MISDEMEANOR WITHIN THE LAST 5 YEARS?

YES NO IF YES, PLEASE EXPLAIN: _____

CONVICTIONS WILL NOT NECESSARILY DISQUALIFY APPLICANT; EACH CASE IS CONSIDERED INDIVIDUALLY.

PERMISSION TO WORK

IF EMPLOYMENT IS OFFERED, CAN YOU SUBMIT VERIFICATION OF YOUR LEGAL RIGHT TO WORK IN THE U.S.?

YES NO

REFERENCES

PROFESSIONAL REFERENCE					PROFESSIONAL REFERENCE				
ADDRESS	STREET	CITY	STATE	ZIP	ADDRESS	STREET	CITY	STATE	ZIP
PHONE		JOB TITLE			PHONE		JOB TITLE		
HOW ACQUAINTED AND FOR HOW LONG					HOW ACQUAINTED AND FOR HOW LONG				

ALL ABOUT YOU

Why did you pick City Sports?

What would make you a great choice for City Sports?

What athletic experiences have you had?

APPLICANTS STATEMENT

If I am employed, I agree to abide by the rules and regulations of the company. I understand that my employment is at-will. Meaning that I do not have a contract of employment for any particular duration or limiting the grounds for my termination in any way. I am free to resign at any time, and City Sports may terminate my employment at any time and for any reason. All of the information I have supplied in this application is a true and complete statement of the facts and if employed any false statement or omission could result in immediate dismissal. I authorize City Sports to conduct a background inquiry to verify the statements and information on this application and other documentation that I have provided, and other areas that may include prior employment, consumer credit, criminal convictions, motor vehicle history and other reports. I authorize all previous employers or other persons who have knowledge of me, or my records, to release such information to City Sports. I hereby release any individual, agency, and City Sports from all claims or liabilities whatever that may arise from the disclosure of such information.

City Sports is an Equal Opportunity Employer.

SIGNATURE _____ DATE _____

THIS APPLICATION WILL ONLY BE CONSIDERED FOR THREE MONTHS. IF YOU HAVE NOT BEEN HIRED WITHIN THREE MONTHS OF FILLING OUT THIS APPLICATION AND YOU WISH TO CONTINUE TO BE CONSIDERED FOR EMPLOYMENT, YOU MUST FILL OUT ANOTHER APPLICATION.