



EMPLOYMENT APPLICATION

Thank you for your interest in applying with Knockouts, an equal opportunity employer.

At Knockouts we are committed to equal employment opportunity. We respect, value and welcome diversity in our workforce, as well as in our customers and suppliers. Knockouts values being a great place to work and strives to maintain a safe, drug-free and tobacco-free environment. Accordingly, Knockouts conditions all offers of employment on satisfactory completion of a drug screen and background check.

Knockouts considers all applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or disability or any other legally protected status.

PLEASE READ AND SIGN BEFORE FILLING OUT THE APPLICATION

After you submit an application, Knockouts will check your references and make a determination of your qualifications. If you do not qualify, Knockouts will retain your application for one year. If you qualify for a position as one of the Knockouts Girls®, we will contact you by telephone and will then continue through the hiring process.

I understand that any employment or offer of employment could be subject to a post-offer/pre-employment history verification, criminal records search, a physical examination (if applicable) and satisfactory verification of all job qualifications which may include, but not be limited to, academic credentials.

I understand that employment at Knockouts is at-will, which means I may terminate my employment or Knockouts may terminate my employment at any time for any reason except an unlawful one. No representations to the contrary have been made to me, and I further understand that no employee of Knockouts is authorized to make any such representation verbally or in writing contrary to the foregoing.

I hereby certify that the information I provided in the Employment Application is true and contains no misrepresentation, falsification or omission (including my resume if attached). I understand that if Knockouts employs me, any misrepresentation, falsification or omission by me may lead to termination of my employment.

I hereby agree that any controversy or claim arising out of or relating to my application for employment, the determination of my qualifications, my employment or the termination of my employment with Knockouts shall be settled by arbitration in accordance with the Commercial Arbitration Rules of the American Arbitration Association, and judgment upon the award rendered by the arbitrator(s) may be entered in any court having competent jurisdiction.

If an offer of employment is extended to me, I understand that Knockouts may request information such as Social Security number, birth date, and driver's license number/state of issuance that will be used for verification purposes.

I hereby authorize Knockouts to obtain a consumer report, consult with representatives, employees, agents and others of any private or public institutions or employers with which I have been associated or which have records concerning me, and with others who may have information, personal or otherwise, either in writing or verbally. I release Knockouts and its agents and any person or entity which provides information pursuant to this authorization from liability for any damage that may result from furnishing the information. The following is my true and complete legal name, and all information is true and complete.

If you are applying for a position as one of the Knockouts Girls® (stylist, massage therapist, etc.), the job requires you, and pays you for your participation in public entertainment events, marketing and community functions, promotional and fundraising events, engaging in photo opportunities with admiring fans as well as signing autographs. Knockouts Girls® also engage in and are paid for professional modeling for Knockouts sportswear, photo-shoots and/or the annual calendar; if you try-out and are selected to participate. I have read and I agree to the above statements and bona fide occupational qualifications for the position as one of the Knockouts Girls®.

Applicant's Name (please sign and print your name)

Application Date

FILL OUT THIS APPLICATION COMPLETELY; IF YOU HAVE A RESUME PLEASE ATTACH IT.

NAME (First, Middle, Last) _____ SOCIAL SECURITY NUMBER _____

CURRENT ADDRESS (street, city, state, zip) _____

PRIMARY PHONE NUMBER _____ SECONDARY PHONE NUMBER _____ EMAIL _____

POSITION YOU ARE APPLYING FOR _____ YOUR AGE: (Less/more than 18 years old) _____

DATE YOU CAN START WORK: _____ **FULL-TIME?** Yes No **PART-TIME?** Yes No

CAN YOU WORK DAYS?	Yes	No	WHICH DAYS?	Any day	Mo Tu We Th Fr Sa Su
CAN YOU WORK EVENINGS?	Yes	No	WHICH EVENINGS?	Any evening	Mo Tu We Th Fr Sa Su
CAN YOU WORK WEEKENDS?	Yes	No	WHICH DAY(S)?	Saturday/ Sunday	
CAN YOU WORK HOLIDAYS?	Yes	No			

EDUCATION - HIGH SCHOOL: NAME AND LOCATION: _____

PROFESSIONAL LICENSES (Cosmetology, Massage Therapy, etc)
LICENSE #1: PROFESSIONAL LICENSE/ASSOCIATION _____
 DATE OF ISSUE AND EXPIRATION DATE _____
 STATE OF ISSUE _____ LICENSE NUMBER _____

EMPLOYMENT HISTORY - CURRENT OR MOST RECENT JOB

EMPLOYER NAME _____	EMPLOYER ADDRESS _____
STARTING DATE _____	END DATE _____
SUPERVISOR'S NAME and TITLE _____	PHONE NUMBER _____

May we call? Yes No - why not? _____
 JOB TITLE _____ Pay rate: _____
 REASON FOR LEAVING _____

SECOND MOST RECENT JOB

EMPLOYER NAME _____	EMPLOYER ADDRESS _____
STARTING DATE _____	END DATE _____
SUPERVISOR'S NAME and TITLE _____	PHONE NUMBER _____

May we call? Yes No - why not? _____
 JOB TITLE _____ Pay rate: _____
 REASON FOR LEAVING _____

ADDITIONAL INFORMATION - DO YOU SMOKE? Yes No **(Knockouts is a tobacco-free workplace)**
AFTER BEING HIRED, CAN YOU SUBMIT VERIFICATION OF YOUR IDENTITY AND LEGAL RIGHT TO WORK IN THE UNITED STATES OF AMERICA? Yes No

HOW WERE YOU REFERRED TO KNOCKOUTS? _____
 If you were referred by a Knockouts employee please give name: _____

REFERENCES (Please list two persons familiar with your work abilities)

NAME _____	PHONE NUMBER _____	OR	EMAIL _____
NAME _____	PHONE NUMBER _____	OR	EMAIL _____

Applicant's Name (please sign and print your name)

Application Date