EMPLOYMENT APPLICATION FOR LYNDEN SPORTS CENTER

Please fill out your conta	ict information below.	
• •		
Name: Address:		
Phone Number:		Preferred Contact Method? Yes No
Email:		Preferred Contact Method? Tyes No
CERTIFICATIONS	AND FDUCATION	J
List your certifications ar		
Certificate Type:		Date Received:
		Graduation Date: GPA:
		Graduation Date: GPA:
EMPLOYMENT O Select the box(es) of the		stad in applying for
_	_	
] Sales Representative	Administration	
-	☐ Administration ☐ Lot Manager	Parts Secretary Service Writer
_	Lot Manager	Parts Secretary Service Writer
Service Technician Other: References and E	Lot Manager Experience	☐ Parts Secretary ☐ Service Writer ☐ Driver ☐ Marketing and Display
Service Technician Other:	Lot Manager Experience ment as well as the date	Parts Secretary Service Writer Driver Marketing and Display es served there.
Service Technician Other: References and E List any previous employ	Lot Manager Experience ment as well as the date	Parts Secretary Service Writer Driver Marketing and Display es served there.
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Submission Directions: Save this pdf and email to doug@lyndensportscenter.com or mail it to Lynden Sports Center, ATTN: General Manager, 1016 O'Malley Drive, Coopersville, MI 49404, or fax it to (616) 997-4888.