



IART
THE INTERNATIONAL ASSOCIATION OF RESISTANCE TRAINERS

Apprenticeship Application

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Date Available	Social Security No.		
Position Applied for			
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain

EDUCATION			
High School		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

REFERENCES	
<i>Please list three professional references.</i>	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

PREVIOUS EMPLOYMENT			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

MILITARY SERVICE	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

DISCLAIMER AND SIGNATURE	
I certify that my answers are true and complete to the best of my knowledge.	
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.	
Signature	Date

STEP 3: Personal Conditions

The following questions cover the physical, emotional and financial strains you may encounter when entering this apprenticeship program.

- | | YES | NO |
|------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------|
| • Are you aware that entering this apprenticeship may possibly require working 3-6 hours a day, four to five days a week, and possibly on Saturdays? | _____ | _____ |
| • Are you prepared, to work without pay for 1-2 months while you earn your I.A.R.T. Certified Fitness Clinician credentials? | _____ | _____ |
| • Are you prepared to work an unconventional schedule and invest time to build a clientele? | _____ | _____ |
| • Do you have the ability to aside personal opinions and past education in order to better understand views counter to your own? | _____ | _____ |
| • Do you have the emotional strength to withstand the strain of training people with varying personalities? | _____ | _____ |
| • Can you handle the stress of being responsible for the health and wellbeing of others? | _____ | _____ |

STEP 4: Experience

Certain skills and experience are critical to the success of a business. Since it is unlikely you possess all the skills and experience needed, you may need to hire personnel to make up for those you lack. By answering the following questions, you can identify the skills you possess and those you lack (i.e., your strengths and weaknesses). Answering "Yes" to any of these questions means you have some of the skills needed to operate a successful business; a negative answer means you may have to acquire these skills or hire personnel to supply them for you.

- | | YES | NO |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------|
| • Do you know what basic skills you will need to become a personal trainer? | _____ | _____ |
| • Do you currently possess those skills? | _____ | _____ |
| • Have you ever worked in a managerial or supervisory capacity? | _____ | _____ |
| • Have you ever worked in a business similar to this opportunity? | _____ | _____ |
| • Have you had any formal personal training experience? | _____ | _____ |
| • If you discover you do not have the basic skills needed to be a personal trainer, would you be willing to delay your plans until you have acquired these skills? | _____ | _____ |

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As previously stated, this evaluation is not meant to be comprehensive, but rather it is meant to serve as a guide to help you begin assessing your goals, and to define your self-perception. It is also intended to help PURE PHYSIQUE/ I.A.R.T. with an initial assessment of your preparedness in entering our apprenticeship program. We strongly recommend you consider the inherent value of your findings and possibly conduct even more research in this area.

Going into this profession for the wrong reasons could spell disaster for both you, your family and those you are working with. Doing so for the right reasons, however, will bring you rewards that far surpass any you would have ever imagined.

Please mail your completed application to:

**PURE PHYSIQUE/I.A.R.T.
Attn: Apprenticeship Program
3695 Old Yorktown Rd.
Shrub Oak, NY 10588**

**914.302.2022
Info@PurePhysique.com**