

I understand that I must review this document. Then I must print, complete, and email the completed form to HR@xsportfitness.com as part of the new hire/re-hire onboarding process.

Confidential

EMPLOYMENT INQUIRY SUPPLEMENT FORM AND RELEASE

CF Management-IL, LLC and/or any of their affiliates and other related parties, including but not limited to Capital Fitness, Inc. (such relevant employer company or companies, the "Company"), may conduct or have a consumer reporting agency conduct background inquiries in connection with your starting or continuing employment with the Company. To aid in the proper identification of files or records and procurement of requested information, the following information is, and other information may be, necessary.

Print Name: _____

All Other Names Ever Used: _____

Current Address, City, State, and Zip Code: _____

Other Cities/States of residence in the past Five Years: _____

Hired By XSport Gym Location: _____ **Position Hired For:** _____

To be filled out only upon or after offer of employment:

Date of Birth: _____

Gender: _____ (used only for identification purposes as part of a background check)

Note: A conviction does not constitute an automatic bar to employment. The type of conviction, when it occurred, and the nature of the position sought will be considered.

Have you ever been convicted of a crime including, without limitation, any misdemeanor, felony, or DUI convictions? *(Applicant is not obligated to disclose sealed or expunged records of conviction or arrest.)*

☐ **Yes** ☐ **No**

If yes, what crime? _____

If yes, list the location, dates, and disposition of the case: _____

I confirm that I understand that employment, if any, is conditioned on (among other conditions of employment) successful completion of a background check and all required company documents to the satisfaction of the Company in its sole discretion. I confirm that I understand that the Company will not tolerate any inaccuracies, omissions or misleading statements on my employment application or any other document submitted by me in connection with employment with the Company. I further confirm that I agree that my employment with the Company, if any, is employment at will, which among other things allows the Company to terminate me with or without cause in the Company's sole and absolute discretion and which includes, without limitation, the right to take action with respect to my employment in the event of any such inaccuracy, omission or misleading statement or based in whole or in part on information furnished by any reporting party, including, without limitation, rejection of or dismissal from employment in the Company's sole and absolute discretion.

I confirm that I have read this full document and that all information provided above by me is correct.

Signature: _____

Date: _____