

Pro Cyclery Employment Application

*First _____ *Middle _____ *Last _____

*Street Address _____ *Date Of Birth _____

*City _____ *State _____ *Zip _____ *Phone _____

Email address _____

***Please check the box for the position you are applying for.**

Manager Salesperson Technician/Mechanic

***If hired, when will you be able to begin work?**

Right away Next week Next month

***What hours would you like to work?**

Full-time Part-time

***What's the highest level of education you've achieved?**

High School College Degree Trade School What kind? _____

Do you speak any languages other than English? If yes, tell us which one. _____

How can you contribute to the success of Pro Cyclery? _____

Work History

Please list below your previous jobs that you feel best reflect your abilities as they pertain to the desired position.

Business Name: _____ Location: _____

Position: _____ Ending Wage:\$ _____ Employment Dates: _____

Reference Name & Phone Number: _____

Business Name: _____ Location: _____

Position: _____ Ending Wage:\$ _____ Employment Dates: _____

Reference Name & Phone Number: _____

Business Name: _____ Location: _____

Position: _____ Ending Wage:\$ _____ Employment Dates: _____

Reference Name & Phone Number: _____

Business Name: _____ Location: _____

Position: _____ Ending Wage:\$ _____ Employment Dates: _____

Reference Name & Phone Number: _____

Bicycle Knowledge "Optional"

Please describe what type of cyclist you are and what kind of bike you own. _____

Please put the word **ROAD** or **MOUNTAIN** next to the group below as it applies.

Ultegra _____

Force _____

XTR _____

LX _____

XO _____

Tiagra _____

Alivio _____

Centaur _____

Stressing a wheel prevents what? _____

A rear hub on average has how many ball bearings and what size? _____

Please list the groups below in order of quality.

Mirage # _____

Altus # _____

XT # _____

105 # _____

Force # _____

Listed below are a series of rear derailleur adjustments. Please put them in order.

Cable tension # _____

High limit screw # _____

B. tension screw # _____

Low limit screw # _____

Derailleur hanger alignment # _____

All bikes use inner tubes.

True

False

Please put the word **ROAD**, **MOUNTAIN** or **TRI** next to the below as it applies.

Wetsuit _____

Hucking _____

T1 _____

Peleton _____

USTA _____

Bob Roll _____

7-11 _____

XC _____

Once you have filled out this application please.

Email to: procyclery@cox.net

Fax to: 702-228-9431

Mail to: 7034 W. Charleston Las Vegas, NV.

Thanks very much for filling out and submitting the application. We'll be in touch if you qualify for a position with us.