

## **Employment Application**

Please fill out the form below and attach your resume to this application.

Name	
Date	
Age	
Email Address	
Phone Number	
Position Applying for: (circle all that apply)  Experience	Toddler gymnastics Recreational gymnastics Team Gymnastics Parkour Cheerleading Tumbling Dance Front Desk ALL
How many hours per week are you wanting to work?	
What days and times are you available to work?	
When can you start working?	

Do you have any prior commitments that may impact your availability?	
Are you currently employed?	
Are you looking to make this job a career?	
What are your future goals?	
Desired hourly wage?	
Must have hourly wage?	
Education history?	
Please list any classes, certifications or relevant achievements:	
Please List two references: (cannot be a friend or family member)	Name: Phone number: Email: Relationship to contact:
	Name: Phone number: Email: Relationship to contact: