

Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, handicap, or veteran status.

## **Gymnastics Application for Employment**

[Pre-Employment Questionnaire] [An Equal Opportunity Employer]

Last Name:			First	First Name: T			_ Toda	oday's Date:		
Street Address:					City	y:	s	tate:	Zip:	
Home Phone: ()(			Cell F	Phone:	()_					
Emai	l:									
Position Desired:										
How many hours per week do you desire?										
Are y	Are you 18 or older? Salary:									
	School Name & Location		Course of Study		No. years completed		ed	Did you graduate?		
Availa	able work hou	ırs:								
	Monday	Tuesday	Wednesday	Thur	sday	Friday	Sat	urday	Sunday	
If you break	i are currently k, summer bre	/ a student, a eak)?	are you able to	work d	uring s	chool breaks	(ie. sp	oring bre	ak, winter 	

1. The safety of our students is a top priority. Teaching physical skills to children requires quick movements, spotting, and lifting heavy children, sometimes while in awkward positions. Also, a necessary part of the job includes moving and adjusting gymnastics apparatus such as mats, bars, and beams which can weigh as much as 200lbs. Do you have any injuries or conditions which could limit your ability to safely preform the duties required for the position for which you are applying? If yes, please explain in detail:						
2. Have you ever bee	n convicted of a crime?	Yes	No			
3. Have you ever bee	n dismissed from employment	or laid off	?	Why?	_	
4. Are you legally elig	ible to work in the United State	es?	Yes	No		
5. Are you now or hav	ve you ever been:			First Aid Certified KAT Certified		
6. Do you have your	own car or a dependable way t					
7. Where and how lor	ng did you have lessons in gym	nnastics/cl	neer/related	fields?		
9. Any awards and titl	nd coaches?les won in gymnastics, tumblings, honors:	g, or relate	ed fields?			
11. Our hours very fro come in on your day	om week to week and occasion off. Do you foresee any proble	ally you n ns with th	nay be aske is?	d to stay late, leave ea		
	work in the office in the future?  st below last three employers,					
Date: Month/Yea	r Name & address of employer	Salary	Position	n Reason for leav	ving	
From: To:	-					
From: To:	_					
From: To:	-					

Are you currently emplo	oyed? May we c	ontact your current e	employer?
Which of these jobs did	you like best?		
What did you like most	about this job?		
References: Give the na	ames of three persons not rela	ted to you for whom	you have worked with.
Name	Phone Number	Business	Years Acquainted
1.			
2.			
3.			
	rience as a gymnast/cheerlead you did it, how far you progres		
2.			
3.			
the employment experie	rience as a gymnast/cheerlead ence you detailed in the first pa re your duties, how far did you	age of this applicatio	n. What groups or levels did
2.			
3.			

Describe in detail 3 drills or approaches that you would use with a group of 8-year-olds who were having trouble mastering a cartwheel:
1.
2.
3.
You have a group of 12-year-olds who are not paying attention. What do you do?
Describe your greatest strength and weaknesses as a teacher.
"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that. If employed, falsified statements on this application shall be grounds for dismissal.
I authorize investigation of all statements contained herein and references listed above to give you any and all information concerning my previous employment and any pertinent information they may not have, and release all parties from all liability for any damage that may result from furnishing same to you.
I understand and agree that, if hired, my employment isfro no definite period and may, regardless of he date of payment of my wages and salary, be terminated at any time without prior notice and without cause.
Realizing this is a business of children, I understand that by signing this I am allowing Elite Athletics, Inc. to preform various background checks."
Date:Signature: