

EMPLOYMENT APPLICATION

NAME: _____ TELEPHONE #: _____
FIRST MIDDLE LAST

ADDRESS: _____
STREET ADDRESS CITY STATE ZIP

ARE YOU 18 OR OLDER _____ HAVE YOU EVER COACHED GYMNASTICS BEFORE? _____
 IF NOT, AGE: _____ IF YES, LOCATION AND AGES COACHED: _____

AVAILABILITY:

TOTAL HOURS AVAILABLE PER WEEK: _____

HOURS AVAILABLE: _____

	M	T	W	TH	F	S	SU
FROM							
TO							

ARE YOU LEGALLY ABLE TO BE EMPLOYED IN THE U.S.? YES / NO _____ HOW DID YOU HEAR OF US? _____ DO YOU HAVE TRANSPORTATION TO WORK? _____

SCHOOL MOST RECENTLY ATTENDED:

NAME: _____ LOCATION: _____ PHONE: _____

GRADUATED? YES / NO YEAR _____ NOW ENROLLED? YES / NO _____ LAST GRADE COMPLETED? _____

GRADE POINT AVERAGE? _____ SPORTS OR ACTIVITIES? _____

TWO MOST RECENT JOBS (IF NOT APPLICABLE, LIST U.S. MILITARY, VOLUNTEER WORK OR PERSONAL REFERENCES)

COMPANY: _____ LOCATION: _____

PHONE: _____ JOB: _____

SUPERVISOR: _____ DATES WORKED: FROM _____ TO _____

SALARY: _____ REASON FOR LEAVING _____ **MGMT. REFERENCE CHECK DONE BY:** _____

COMPANY: _____ LOCATION: _____

PHONE: _____ JOB: _____

SUPERVISOR: _____ DATES WORKED: FROM _____ TO _____

SALARY: _____ REASON FOR LEAVING _____ **MGMT. REFERENCE CHECK DONE BY:** _____

DURING THE PAST 10 YEARS, HAVE YOU EVER BEEN CONVICTED OF A FELONY CRIME INCLUDING BUT NOT LIMITED TO CHILD OFFENSES? YES _____ NO _____ IF YES, DESCRIBE IN FULL _____

A conviction will not necessarily bar you from employment

1). I certify that the information contained in this application is correct to the best of my knowledge and understand that deliberate falsification of this information is grounds for dismissal in accordance with Tumbleweeds Gymnastics & Kaia F.I.T. policy. 2). I authorize the references listed above to give you any and all information concerning my previous employment and pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you. 3). I acknowledge that, if I became employed, I will be free to terminate my employment at any time for any reason and TUMBLEWEEDS GYMNASTICS & Kaia F.I.T. retains the same rights.

SIGNATURE _____ Date: _____

TUMBLEWEEDS GYMNASTICS & Kaia F.I.T. is an equal opportunity employer. The Civil Rights Act of 1964 and State and Local Laws prohibit discrimination on the basis of disability and the Age Discrimination in Employment Act of 1978 and some State and Local laws prohibit discrimination on the basis of age with respect to individuals who are at least 40. IF HIRED, FEDERAL LAW REQUIRES THAT YOU FURNISH DOCUMENTATION SHOWING YOUR IDENTITY AND THAT YOU ARE LEGALLY AUTHORIZED TO WORK IN THE UNITED STATES.

STAFF ONLY: Date Received: _____ By: _____

Write a paragraph stating why you feel that you would be a good addition to Tumbleweeds.
Please include any experience with children, gymnastics or coaching.

STAFF USE ONLY

1st Interview: _____ Interviewed by: _____

2nd Interview: _____ Interviewed by: _____

Survey Classes: _____ Survey Classes: _____

If hired:

Primary TW's location: MINDEN / CARSON Available for both?: YES / NO

Date of Birth: _____ Email Address: _____

Alt Phone: _____ W4 Form Complete: _____

Mentor/Training Coach assigned: _____

Employee Handbook: _____

Probation Period Review set for: _____

Background Check Complete: _____ USAG Eligible?: _____

Pre Employment Drug Screening—Date: _____ Clear?: _____

CPR Certified?: YES / NO Exp date: _____ First Aide Certified?: YES / NO Exp date: _____

Other Certifications: _____
