

Application for Employment

Personal Inform	<u>ation</u>	Da	te			
Name		_ Soc. Secui	rity#			
Address: Street, City	, State, Zip					
Phone #		Alt. #				
Email		Age 18 or	older? Y	es	No	
Employment De	sired					
Position applying for	·					
Date you can start		Desired w	Desired wage/salary			
Are you currently en	nployed?					
How did you hear ab	out us?					
Gymnastics/Che	er/Dance/Teac	hing Certification	<u>ons</u>			
Are you now or have	you ever been: (Ple	ase circle certificates a	nd indicate expi	ratio	n date)	
CPR Certified		First Aid Certified				
USAG Membership		USAG Safety Certified				
KAT Certified		Other Safety Certified				
Education						
	Name/Location		# of Years	G	raduate?	
High School						
College						
Grad. School						
Trade/Bus. School						

Gymnastics/Cheer/ Dance/Teaching Employment (List last 2 employers, starting with most recent)

1. Name & Address of Employer (In	nclude phone #)
Supervisor	Position
Reason for leaving	
Dates Employed: From	To
2. Name & Address of Employer (In	nclude phone #)
Supervisor	
Reason for leaving	
Dates Employed: From	To
Describe your greatest strengths a	nd weaknesses
What are your goals for the future,	/where do you hope to be?
What interests you about being a C	Gymnastics Coach?

References: Please provide 2 references (not related) whom you have known at least 1 year

Name	Address	Phone	Relationship

Backgro	und	Inform	nation
Dather	unu		паичи

Have you ever been convicted of a felony?	YES	NO
If ves, please explain in detail		

I certify that all information submitted by me on this application is true and complete. I understand that is any false information, omissions or misrepresentations are discovered, my application may be rejected, and if I am employed my employment may be terminated. I agree that all references and former employees may be contacted for a job reference. I also agree that any individual who has knowledge concerning my character or past job performance may be contacted for an employment reference, even if I have not supplied their name on this application.

I give my permission for Bayshore Elite Gymnastics, or those acting as agents of Bayshore Elite Gymnastics to conduct background checks prior to or during my course of employment. This includes, but is not limited to, criminal or police background checks in all state/s, which I have either resides or worked. I also agree that during the first 90 days of employment all employees are considered "in-training". This probationary period allows Bayshore Elite to make sure that I have been placed correctly within the company and give me an opportunity to learn about the programs and receive additional training, if needed.

Signature of Applicant	Date

	d by	<u>nly</u>		Date _.		
On time for	interview?	YES	NO			
Communic	ation skill le	vel				
General rei	marks:					
Availability	7: Pa	ırt-time	Full-tin	ne		
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Director A _l	oproval					
				Date_		
Reference	Check					
1.						
2.						
3.						