



Gymnastics Application for Employment at
 Colorado Gymnastics World, Inc.
 d.b.a. Airborne Gymnastics and Dance

Today's Date	e-mail address:
Name	Phone #
Address (street, city, state)	
Position Desired	Minimum Pay Expected
When will you be available to begin work?	
How many hours per week do you prefer to work?	

Education

School Name & Location	Course of Study	# of Years Completed	Did you Graduate?

Please put an X in the boxes of time you will be available to work:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
8:30 AM-12:00							
12:30-3:00 PM							
3:30-8:30 PM							

Can you think of anything that might hinder you from performing any job duties? _____

Have you ever been convicted of a crime? Yes _____ No _____

Do you Smoke? _____

Have you ever been dismissed from employment or laid off? _____ Why? _____

Do you have your own car? _____ If no, explain how you plan to get to work: _____

Where and for how long did you have lessons in gymnastics? _____

Former teachers and coaches: _____

Any awards or titles won in gymnastics, tumbling, or related fields: _____

What classes or clinics have you attended that you feel will benefit your ability as an instructor? _____

Our hours vary from week to week. Occasionally you may be asked to stay late, leave early, or come in on your day off.

What problems do you foresee with this? _____

List the hardest skills you could do (when you were an athlete) on the following equipment:

Beam:

Bars:

Tumbling:

Trampoline:

Job History: Please list the last four jobs you have held, starting with the most recent

Dates Employed (Month/Year)	Name, Address, and phone of employer	Salary	Positon(s) held, job responsibilities	Reason for leaving
From: To:				
From: To:				
From: To:				
From: To:				

Which of these jobs did you like best? _____
 What did you like most about this job? _____

References: Give the names of three persons not related to you for whom you have worked:

Name	Phone number	Business	Years Acquainted
1.			
2.			
3.			

Tell us why you would be good at the job you have applied for:

Authorization. I authorize Colorado Gymnastics World, Inc. to obtain information about me from my former employers, schools and credit sources. I authorize my previous employers, schools that I have attended, and all credit sources to disclose to Colorado Gymnastics World, Inc. such information about me as Colorado Gymnastics World may request. I release all parties from all liability for any damage that may result from furnishing the same to you.
 _____ Signature

Accuracy: I verify that the statements I have made in this application are true and complete. I understand that if I am hired, any false or incomplete statements in this application will be grounds for immediate discharge.
 _____ Signature

At Will Employment: I acknowledge that if hired, I will be an at will employee. I will be subject to dismissal or discipline without notice or cause, at the discretion of the employer. I understand that no representative of the company, other than the president, has authority to change the terms of an at will employment and that any such change can occur only in a written employment contract. _____ Signature

Print Name: _____ Today's Date: _____