



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 _____ Today's Date _____

Street Address _____ City _____ State _____ Zip Code _____

Home Phone (____) _____ - _____ Mobile (____) _____ - _____ E-mail address _____

Position desired _____ Social Security # _____

How many hours per week do you desire? _____ Pay expected _____

Are you 18 or older? _____ When can you start? _____

| School Name & Location | Course of Study | No. of Years Completed | Did You Graduate? |
|------------------------|-----------------|------------------------|-------------------|
| | | | |
| | | | |
| | | | |
| | | | |

Available to work:

| | Mon. | Tues. | Wed. | Thur. | Fri. | Sat. | Sun. |
|--------------|------|-------|------|-------|------|------|------|
| 8:30-3:00 PM | | | | | | | |
| 3:00-8:30 PM | | | | | | | |

1. The safety of our students is a top priority. Teaching physical skills to children requires quick movements and 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 horses and parallel bars which can weigh as much as two hundred pounds. Do you have any injuries or conditions which could limit your ability to safely perform the duties required for the position for which you applied? If yes, please explain in detail: _____

2. Have you ever been convicted of a crime? Yes No

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

4. Are you legally eligible to work in the United States? Yes No

5. Are you now or have you ever been: Safety Certified First Aid Certified
 CPR Certified KAT Certified

6. Do you have your own car or dependable way to work? _____ Explain _____

7. Where and how long did you have lessons in gymn/cheer/related fields? _____
8. Former teachers & coaches: _____
9. Any awards or titles won in gymnastics, tumbling or related fields: _____
10. Interests, activities, honors _____
11. Our hours vary from week to week and occasionally you may be asked to stay late, leave early, or come in on your day off. Do you foresee any problems with this? _____
12. Would you like to work in the office in the future? _____

FORMER EMPLOYERS (List below last three employers, starting with the most recent one first.)

| Date Month/Year | Names and Address of Employer | Salary | Position | Reason for Leaving |
|--------------------------|-------------------------------|--------|----------|--------------------|
| From: _____ To: _____ | | | | |
| From: _____ To: _____ | | | | |
| From: _____ To: _____ | | | | |
| From: _____ To: _____ | | | | |

Are you currently employed? _____ May we contact your current employer? _____

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 who for whom you have worked.

| Name | Phone Number | Business | Years Acquainted |
|------|--------------|----------|------------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |

"I certify that the facts contained in this application are true and complete to best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investation of all statements contained herein and the references listed abobe to give you any and all information concerning my previous employment and any pertinent information they may have, and release all parties from all liabilty for any damage that may result from furnishing same to you.

I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice and without cause."

Realizeing this is a business of children, I understand that by signing this I am allowing St. Louis Spirits Gymnastics Club to perform various background checks.

Date: _____ Signature _____

Please detail your experience as a gymnast/cheerleader/related field. Indicate where you did most of your training, how long you did it, how far you progressed, and how you did. Please start with your most recent training.

1.

2.

3.

Please detail your experience as a gymnast/cheerleader teacher or coach. Provide details concerning the employment experience you detailed on the first page of this application. What groups or levels did you work with, what were your duties, how far did you progress, what did you accomplish?

1.

2.

3.

Describe in detail three 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 weakness as a teacher:

List the hardest elements you can do on the following equipment:

Beam _____ Bars _____ Tumbling _____ Trampoline _____

Write lesson plans for a beginning gymnastics class for girls ages 6-12. Please be specific.

| Beam | Bars | Tumbling | Trampoline | | |
|-------------|--------------------|-----------------|--|--|--------------------|
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