



# EMPLOYMENT APPLICATION

PRE-EMPLOYMENT QUESTIONNAIRE  
EQUAL OPPORTUNITY EMPLOYER  
(PLEASE PRINT)

TODAY'S DATE \_\_\_\_\_

## PERSONAL INFORMATION

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_ M/F \_\_\_\_\_

SOCIAL SECURITY # \_\_\_\_/\_\_\_\_/\_\_\_\_ DATE OF BIRTH \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

POSITION DESIRED \_\_\_\_\_

DATE YOU CAN START \_\_\_\_\_ SALARY DESIRED \_\_\_\_\_

ARE YOU CURRENTLY EMPLOYED?      YES      NO      REFERRED BY: \_\_\_\_\_

IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER?      YES      NO

HAVE YOU EVER APPLIED OR WORKED FOR SPORTASTIKS BEFORE?      YES, WHEN: \_\_\_\_\_      NO

## EDUCATION HISTORY

HIGH SCHOOL \_\_\_\_\_ YEARS ATTENDED \_\_\_\_\_

COLLEGE \_\_\_\_\_ YEARS ATTENDED \_\_\_\_\_

## FORMER EMPLOYERS

MONTH/YEAR	NAME & ADDRESS	SALARY	POSITION	REASON FOR LEAVING
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**EXPERIENCE AND CERTIFICATIONS**

DO YOU HAVE ANY TEACHING EXPERIENCE? GYMNASTICS - CHEERLEADING - SCHOOL NONE

ARE YOU CPR CERTIFIED? YES, EXPIRES:\_\_\_\_\_ No

ARE YOU FIRST AID CERTIFIED? YES, EXPIRES:\_\_\_\_\_ No

ARE YOU USA GYMNASTICS SAFETY CERTIFIED? YES, EXPIRES:\_\_\_\_\_ No

ARE YOU A USA GYMNASTICS MEMBER? INSTRUCTOR#\_\_\_\_\_ PROFESSIONAL#\_\_\_\_\_

DO YOU HAVE ANY USASF COACHES CREDENTIALS? YES, LEVELS\_\_\_\_\_ No

ANY OTHER CERTIFICATIONS/? YES No  
LIST \_\_\_\_\_  
\_\_\_\_\_

**REFERENCES (PLEASE GIVE THREE)**

NAME	PHONE	BUSINESS	YEARS KNOWN
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**AUTHORIZATION**

“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 THE APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES AND EMPLOYERS LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTIENENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE THE COMPANY FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM UTILIZATION OF SUCH INFORMATION.

I ALSO UNDERSTAND AND AGREE THAT NO REPRESENTATIVE OF THE COMPANY HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT OF ANY SPECIFIED PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRACY TO THE FOREGING, UNLESS IT IS IN WRITING AND SIGNED BY AN AUTHORIZED COMPANY REPRESENTATIVE.”

DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

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INTERVIEWDED BY: \_\_\_\_\_ DATE \_\_\_\_\_

NOTES \_\_\_\_\_  
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