

## Applicant Information

(Please print and fill out the application. When completed email us a photo of the application along with your resume or walk in during our operating hours and one of our staff will take it up in person)

- Full Legal Name: \_\_\_\_\_
  - Preferred Name: \_\_\_\_\_
  - Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_
  - Are you at least 15 years old? ☐ Yes ☐ No
  - Phone Number: \_\_\_\_\_
  - Email Address: \_\_\_\_\_
  - Home Address: \_\_\_\_\_
  - City / State / ZIP: \_\_\_\_\_
  - Are you legally authorized to work in this country? ☐ Yes ☐ No
  - Are you currently enrolled in school? ☐ Yes ☐ No  
If yes, school name & grade: \_\_\_\_\_
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## Position & Availability

- Which **part-time Assistant Coaching** position are you applying for?  
☐ Beginner ☐ Trampoline and Tumbling ☐ Advanced Tumbling
- Days available to work: ☐ Mon ☐ Tue ☐ Wed ☐ Thu ☐ Fri ☐ Sat ☐ Sun
- Available weekday hours: \_\_\_\_\_
- Available weekend hours: \_\_\_\_\_

- Are you available during school breaks/holidays? ☐ Yes ☐ No
  - Earliest start date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_
  - How long can you commit to this position? \_\_\_\_\_
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## Gymnastics Background

- Do you have prior gymnastics experience? ☐ Yes ☐ No
  - Number of years of gymnastics experience: \_\_\_\_\_
  - Disciplines participated in (check all that apply):  
☐ Artistic ☐ Tumbling ☐ Trampoline ☐ Cheer ☐ Other: \_\_\_\_\_
  - Levels trained or competed at: \_\_\_\_\_
  - Have you assisted with coaching before? ☐ Yes ☐ No  
 If yes, explain: \_\_\_\_\_
  - Are you comfortable assisting with drills, demonstrations, and spotting under supervision? ☐ Yes ☐ No
  - Are you willing to complete required training and follow safety policies? ☐ Yes ☐ No
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## Experience Working With Children

- Do you have experience working with children? ☐ Yes ☐ No
- Age groups worked with: \_\_\_\_\_
- Type of experience (check all that apply):  
☐ Coaching ☐ Babysitting ☐ Camps ☐ Tutoring ☐ Volunteering ☐ Other
- How do you help create a positive environment for children?  
 \_\_\_\_\_
- How would you handle a child who is upset or not listening?

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## Work & Volunteer Experience

- Have you had previous jobs or volunteer roles? ☐ Yes ☐ No
  - Employer/Organization Name: \_\_\_\_\_
  - Role/Title: \_\_\_\_\_
  - Dates of Service: \_\_\_\_\_
  - Main Responsibilities:  
\_\_\_\_\_
  - May we contact your previous employer/supervisor? ☐ Yes ☐ No
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## Safety & Background

- Have you ever been convicted of a felony or misdemeanor? ☐ Yes ☐ No
  - Do you have any pending criminal charges? ☐ Yes ☐ No
  - Have you ever been investigated for an offense involving minors? ☐ Yes ☐ No
  - Have you ever been prohibited from working with children? ☐ Yes ☐ No
  - Do you consent to a background check if legally permitted? ☐ Yes ☐ No
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## Physical Requirements

- Are you physically able to assist with spotting and active supervision? ☐ Yes ☐ No
  - Do you have any medical limitations we should be aware of? ☐ Yes ☐ No  
If yes, explain: \_\_\_\_\_
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## References (provide at least one)

- Reference Name: \_\_\_\_\_
  - Relationship: \_\_\_\_\_
  - Phone/Email: \_\_\_\_\_
- 

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- 

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## Applicant Acknowledgment

- I certify that all information provided is true and complete. ☐ Yes ☐ No
  - Applicant Signature: \_\_\_\_\_
  - Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_
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### **Parent / Guardian Consent (Applicants 17 & Under Only)**

- Parent/Guardian Full Name: \_\_\_\_\_
- Phone Number: \_\_\_\_\_
- Email Address: \_\_\_\_\_
- I consent to my child working as a part-time Assistant Gymnastics Coach. ☐ Yes ☐ No
- I understand the role involves physical activity and child supervision. ☐ Yes ☐ No
- Parent/Guardian Signature: \_\_\_\_\_
- Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_