



# Application for Employment or Volunteering

Thank you for your interest in working or volunteering at Energym Gymnastics. Energym Gymnastics is committed to creating a safe and positive environment for all.

Please answer each question fully and accurately. No action can be taken on this application unless it is complete. Use blank papers if you do not have enough room on this application. **PLEASE PRINT**, except for signature on back of this application.

**PLEASE USE INK**

**PERSONAL INFORMATION:**

Name (Last, First, Middle): \_\_\_\_\_

Current Street Address: \_\_\_\_\_

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

Home Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Cell Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Are you at least 18 year of age (Circle) ? Yes No

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

If hired, can you furnish proof you are eligible to work in the United States (Circle) ? Yes No

How did you learn of the position (Circle) ? Ad Walk-in Website Referred by \_\_\_\_\_

**WHAT POSITION ARE YOU APPLYING FOR:**

Job Applied For: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Are you seeking (Circle): Full-time Part-Time Temporary Summer School Year

When are you available to work (Circle): Days Evenings Nights Weekends On Call Sub

What date are you available to start employment? \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Salary requested: \$ \_\_\_\_\_ per \_\_\_\_\_

**EMPLOYMENT HISTROY: (Complete even if you have a resume to attach.)**

Account for all periods of time including military service and any periods of unemployment. List your most current employment first. If self-employed provide company name and supply business references. If a college student, list school and major.

NOTE: Offered employment may be contingent upon acceptable references from current and former employers.

<b>Time in Position</b>	<b>Name and complete address of Employer</b>	<b>Name and Title of Last Supervisor</b>

**Your Title:** \_\_\_\_\_ **Employer Telephone ( \_\_\_\_\_ )** \_\_\_\_\_

**Key Duties:** \_\_\_\_\_

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<b>Time in Position</b>	<b>Name and complete address of Employer</b>	<b>Name and Title of Last Supervisor</b>

**Your Title:** \_\_\_\_\_ **Employer Telephone ( \_\_\_\_\_ )** \_\_\_\_\_

**Key Duties:** \_\_\_\_\_

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<b>Time in Position</b>	<b>Name and complete address of Employer</b>	<b>Name and Title of Last Supervisor</b>

**Your Title:** \_\_\_\_\_ **Employer Telephone ( \_\_\_\_\_ )** \_\_\_\_\_

**Key Duties:** \_\_\_\_\_

**EDUCATION:**

School	Name & Address of School	Course of Study	Graduated Yes or No	Grade Completed	Diploma/ Degree
High School					
College					
College					
Other					

**SKILLS:**

If you are an experienced operator of any computers, business office machines or equipment, please list.

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Word Processing (specify software): \_\_\_\_\_

Data Entry (specify software): \_\_\_\_\_

What computer software do you know how to use ? \_\_\_\_\_

What skills or additional training do you have that are related to the job for which you are applying ? \_\_\_\_\_

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**GENERAL: YOU MUST ANSWER ALL QUESTIONS IN THIS SECTION.**

Note: a conviction or pending charge will not automatically disqualify you from consideration. However, your failure to list a conviction, pending charge or guilty plea (except those protected by law from disclosure) will disqualify you from further consideration.

1. Have you ever been fired from a job, or asked to resign? Yes  No
2. Do you have any relatives currently employed by this organization? Yes  No
3. May we contact your present employer? Yes  No  If no, please explain: \_\_\_\_\_  
\_\_\_\_\_

4. Certifications:

- a.  USA Gymnastics Membership: Number: \_\_\_\_\_ Expiration: \_\_\_\_\_
- b.  Safety Certifications: Expiration: \_\_\_\_\_
- c.  USA Gymnastics Background Checked: Expiration: \_\_\_\_\_
- d.  Red Cross CPR / First Aid Certified: Expiration: \_\_\_\_\_
- e.  Other Certifications: (Please List) \_\_\_\_\_

**REFERENCES**

Give at least three references who are familiar with your qualifications.

Name	Complete Address	Phone	Occupation

**CERTIFICATION, CONSENT, and RELEASE**

*Please read each statement carefully before signing*

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission (except omissions protected by law) may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements. A copy of this Certification signed by me can be used as my authorization for release of information from my former employers, schools, or persons named in this application.

**I understand I may be required to successfully pass drug screen examinations and background checks. I hereby consent to a pre- and/or post- employment drug screen and background checks as a condition of employment.**

I UNDERSTAND THAT THIS APPLICATION, VERBAL STATEMENTS BY MANAGEMENT, OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESSED OR IMPLIED CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE.

I have read, understand and, by my signature, consent to these statements.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_