

PERSONAL INFORMATION

NAME: _____ **EMAIL:** _____

ADDRESS: _____ **CITY:** _____

HOME #: _____ **CELL #:** _____ **Preferred Contact:** Home Cell

ARE YOU AT LEAST 16 YEARS OF AGE? Yes No

IF UNDER 16, DO YOU HAVE ACCESS TO RECEIVE A WORKER'S PERMIT? Yes No

EMERGENCY CONTACT INFORMATION

NAME: _____ **RELATIONSHIP TO YOU:** _____

HOME PHONE: _____ **CELL PHONE:** _____

NAME: _____ **RELATIONSHIP TO YOU:** _____

HOME PHONE: _____ **CELL PHONE:** _____

GYMNASTICS/DANCE BACKGROUND

ARE/WERE YOU A GYMNAST/DANCER? Yes No **If yes - Where?** _____

HAVE YOU COMPETED? Yes No **If yes - Where?** _____

DO YOU HAVE COACHING EXPERIENCE? Yes No

If yes - Where? _____

CUSTOMER/CLIENT SERVICES RELATED EXPERIENCE

DO YOU HAVE EXPERIENCE WORKING IN CUSTOMER RELATIONS? Yes No

If yes – What and where? _____

DO YOU HAVE EXPERIENCE WORKING WITH CHILDREN? Yes No

If yes – What and where? _____

CERTIFICATIONS

CPR Yes No **If yes, expiration date:** _____

Special Certification: _____

EDUCATIONAL INFORMATION *Provide any educational experience*

SCHOOL: _____ GRADUATED? Yes No DEGREE: _____

SCHOOL: _____ GRADUATED? Yes No DEGREE: _____

REFERENCES *Provide names and contact information for three people **not related** to you*

NAME: _____ PHONE: _____

RELATIONSHIP: _____ YEARS KNOWN: _____

NAME: _____ PHONE: _____

RELATIONSHIP: _____ YEARS KNOWN: _____

NAME: _____ PHONE: _____

RELATIONSHIP: _____ YEARS KNOWN: _____

PERSONAL STATEMENT

WHY ARE YOU INTERESTED IN WORKING AT VIKING GYMNASTICS? _____

WHAT ARE YOUR GOALS IN THIS POSITION?

PROVIDE ONE CHARACTERISTIC OR SKILL THAT YOU WOULD ADD TO THE VIKING TEAM: _____

HOW DID YOU FIND OUT ABOUT VIKING GYMNASTICS? _____

If referred by a current Viking staff member, please include name: _____

PHYSICAL DUTIES

At Viking Gymnastics & Dance, teaching and supervising children in the gym/studio environment sometimes requires quick and unexpected movements including, but not limited to: lifting, catching, or spotting children weighing up to 150lbs. or more. Working in the gym/studio also requires lifting and adjusting heavy sports apparatus. Can you safely perform the essential physical duties listed above for the coaching position for which you are applying? Yes No

APPLICATION ACKNOWLEDGEMENT & AGREEMENT

I certify that the statements given on this application or during an interview are true and complete. I authorize the references given on this application or during any interview to give a representative from Viking Gymnastics & Dance information concerning my previous or current employment and any pertinent information they may have, and I release all parties from any and all liability from any damage that may result.

I have read and agree to the above statement: _____ Date: _____

ACKNOWLEDGEMENT AND AGREEMENT OF BACKGROUND SCREENING

I understand that a safe and happy environment is important at Viking Gymnastics & Dance and that a background screening may be completed, and my initial and continued employment is conditional upon the results of background checks.

INITIAL: _____

I acknowledge that a third-party, National Center for Safety Initiatives, LLC (NCSI), may contact me to receive personal information needed to complete a search of criminal records, sex offender registries, and other public records for Viking Gymnastics & Dance to determine whether to retain me as an employee. I understand that information Viking Gymnastics & Dance receives will not be used in violation of any federal or state equal opportunity law or regulation.

INITIAL: _____

I acknowledge that I must provide NCSI with the requested information in a timely manner, so a background screening may be completed prior to employment with Viking Gymnastics & Dance.

INITIAL: _____

I acknowledge that Viking Gymnastics & Dance will provide me with a letter of instruction from NCSI on how to complete my background screening.

INITIAL: _____

I have read and agree to the above statement: _____ Date: _____