Brown's Gym Orbit Sports Academy Instructor Position Application

Today's Date:							
Name:							
Cell #:							
Address:							
E-mail Address:		Birthday / /					
US Citizen Yes No	Do you have a Work	have a Work Visa Yes No		Foreign Language List			
Marital Status (circle) Married Single	Divorced	Separated	Widowed	Domestic Partner			
Ethnicity (circle) White Hispanic/Latino	Black/African Ar	nerican Asian	America	n Indian/Alaska Native	Two or more Races		
Are You Employed Now: Yo	es No How	many hours a week	Employer				
Are there any medical condi-	tions/allergies to which we	e should be alerted? No	Yes list				
Do you have any physical lin	mitations? No Yes Have	e you had any injures?	No Yes list				
Surgery Yes No When		W	hat For				
Days Available: M T W Times Available: Aftern Training and Backg Have you ever been convicted.	oon Classes Morninground	ng Classes Sat Mon		Birthday Party's			
Explain							
Did you <i>compete</i> in any spor	rt Wh	at level F	How many years				
Year Graduated High Schoo	1	Gymnastics Col	lege Scholarship	Yes No			
University Name		Coaches					
Awards/Honors/Achievemen	nts						
Did you compete gymnastics	s in High School Yes NO	How many years	What Levels	USAG Yes No			
Gymnastics Trainin List any "Special" training in							
List any other job relate	ed skills or qualificatio	ns that support you	r application:				
How far do you live							
List any USAG Congres			nded:				

GYMCERT - CHEER "Safety Course" CPR Certified expiration First Aid Certified expiration Elementary School Teacher Secondary School Teacher Athletic Trainer Certification			
Gymnastics Teaching Questions Page Can You Teach Beginner Girls Classes (Levels 1 & Can You Teach Advanced Beginner Girls (Level 3 Can You Teach Intermediate or Advanced Recreat Can You Teach "Pre-School Gymnastics Classes (Can You Teach Beginner Boys Gymnastics (Level Can You Teach Advanced Boys Gymnastics (Inte Can You Teach Advanced Boys Gymnastics (Inte Can You Teach Trampoline and Tumble Track) You Teach Cheerleading (Stunts, and Tumblin Can You Operate an Over-Head Spotting Rig over Have You Experience in In-ground Landing Pits You What level and age do you prefer to teach	& 2) Yes No (y) Yes No	Parent and Child Classes) Yes No	s ? Yes No
Employment History Name of Present Employer		Supervisor's Name	
Location of Present Employment		Supervisor s Name _	
Location of Present Employment Start Date Part Time	Full Time	Leaving Date	Hourly Pay
Number of Hours Worked Each Week Reason for Leaving	Job Title		
Name of Previous Employer	S		
Location of Previous Employment Start Date Part Time			
Start Date Part Time Number of Hours Worked Each Week Reason for Leaving	Job Title		
Employment History (continued) Par Professional References 1	ige 3		
3.			
"YES" answers to the following 4 ques will consider all the circumstances, incl actions described below. Your Written and suitability for employment. Attach	uding the date a explanation wil	and nature of even l assist us in deter	ts which have led to the
1. Have you ever been convicted of, admitted minor traffic violations not involving any alle even if the matter was later dismissed, deferred dates of the proceedings, the court where the and the final disposition of the cases.	gation of drug or a ed, vacated, or exp	ulcohol impairment)? unged. If you answer	You must answer "YES" "YES" you must provide
YES NO Explanation			
2. Have you ever been dismissed (fired) from charges against you or an investigation of you	any job, or resigne	ed at the request of yo	our employer, or while

matter was later resolved with any form of settlement or Severance agreement, regardless of it's terms. If you answer "YES" you must provide the date of termination of employment, the name, address and telephone number of the employer's) and a statement of the alleged reasons for termination.
YESNOExplanation
3. Have you ever had any license or certificate of any kind (teaching certificate or otherwise) revoked or suspended, or have you in any way been sanctioned by, or is any charge or complaint how pending against you before any licensing, certification or other regulatory agency or body, public or private. If you answer ":YES" you must provide dates of proceedings, name, address and telephone number of the agency or body where proceedings took place, a statement of the accusations against you and final disposition.
YES NO Explanation
4. Are you now being investigated for any alleged misconduct or other alleged grounds for discipline by any licensing, certification or other regulatory body (teacher certification or otherwise) or by your current or any previous employer? If you answer ":YES" you must provide the, name, address and telephone number of the employer or licensing agency and, a statement of the accusations against you.
YES NO Explanation
Who referred you to Brown's Gym Orbit
In Case of Emergency Notify Phone
I certify that the facts contained in this application are true and complete to the best of my knowledge and understanding. That if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigations of all statements herin and the references listed above to give you all information concerning my previous employment. I also agree and encourage background check on myself if officers/administrators of Brown's Gym Orbit deemed necessary. This investigation may include asking my current and any former employer and educational institutes I have attended about my education, training, experience, qualifications, job performance, professional conduct and evaluations, as well as confirming my dates of employment or enroll ment, positions) held, reason for leaving employment, whether I could be rehired, reasons for not hiring (if applicable) and similar information. I release, hold harmless and agree not to sue of file any claims of any kind against my current or former employer or educational institutions; and any officer of employee of either, that is in good faith furnishes written or oral references requested by Brown's Gymnastics to complete its background investigation. If hired, Brown's reserves the right to require a drug screen of any applicant and may request one prior or during my employment. I also acknowledge that there may be random drug screening tests during my employment at Brown's Gym Orbit. Employment at the Company is on an ""at-will" basis. The contents of any employee handbook, Employer policies and practices, are subject to change or modification by the Employer, solely at its discretion, without notice.
Signature of Applicant Date

Please attach a copy of your "driver's license. This application must be filled out even if you have attached a resume.

BROWN'S GYM ORBIT

740 Orange Avenue Altamonte Springs, FL 32714 407.869.8744 phone 407.869.0774 fax