

Diablo Gymnastics Employment Application

Personal Information							
Please print clearly.							
Name:	 First	Las		SSN:			
	THSt	Lusi	•				
Address:							
Cell Phone:	Home Phone:			Email:			
Do you have a leg	gal right to work in the USA?	YES NO	If no, employmen	nt subject to I-9 form.			
Are you 18 years	of age or older?	YES NO	If no, enter your	date of birth:/			
Position you are a	applying for (circle all that apply):	OFFICE COA	ACH FULL-TIME	PART-TIME			
Date available to	start:	How did you	hear about us?				
Teaching physical skills to children and supervising children in a physical environment sometimes requires quick or unexpected movements including lifting or catching children weighing 140 pounds or more. Teaching positions also require lifting and adjusting heavy sports apparatus. Please indicate below if you have any current or past conditions which might keep you from safely performing the physical requirements of the positions for which you are applying:							
		Educa	ition				
High School:		Yea	rs Completed:	Graduated:	YES NO		
College:		Yea	rs Completed:	Graduated:	YES NO		
Degree:							
Graduate School:		Year	s Completed:	Graduated:	YES NO		
Degrees:							
Other Accomplish	nments or Experience (Awards, Cert	ifications, Vol	unteer Work, etc.)):			

Employment History Company: ______ Direct Supervisor: ______ Address: Phone: Final Wage: _____ Start Date: Final Date: _____ Start Wage: _____ Position/Title: ____ Duties: _____ Reason for leaving: I am no longer employed at this company. I am currently employed at this company and it is okay to contact this person. I am currently employed at this company and it is NOT OK to contact this person. _____ Direct Supervisor: ______ Company: ______ Phone: _____ Address: Final Date: _____ Start Wage: _____ Start Date: Final Wage: _____ Position/Title: ______ Duties: ______ Reason for leaving: I am no longer employed at this company. I am currently employed at this company and it is okay to contact this person. I am currently employed at this company and it is NOT okay to contact this person. Direct Supervisor: Company: Address: Phone: Final Wage: _____ Start Date: Final Date: _____ Start Wage: _____ Position/Title: _____ Duties: ______ Reason for leaving: I am no longer employed at this company. I am currently employed at this company and it is okay to contact this person. I am currently employed at this company and it is NOT okay to contact this person. **Professional/Academic References** ______ Address: ______ Phone: _____ Name: Years Acquainted: _____ How do they know you? _____ Name: _____ Address: ____ Phone: ____ Years Acquainted: How do they know you? ______ Address: ______ Phone: _____ Years Acquainted: How do they know you? _____

Signature

By my signature below, I affirm that I have read and understand this application and that I have not withheld any information requested and that any statements I have made are true in word and spirit. I understand that my omission or misrepresentation of fact in this application may result in refusal of employment or that any subsequent discovery of omission or misrepresentation of fact may result in termination from employment.

I hereby authorize Diablo Gymnastics to verify and investigate all statements I have made on this application including my employment history (except my current employer, unless I indicate it is OK).

Furthermore, If I am accepted for employment, I understand and agree that such employment will be AT WILL and may be terminated by either party at any time with reason or no reason and with or without prior notice. I further understand and agree that this AT WILL employment constitutes the entire understanding between me and Diablo Gymnastics regarding the right and ability of either party to terminate employment and that this AT WILL agreement cannot be changed except through a written understanding signed by Diablo's General Manager or President.

Signature:	Date:
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Diablo Gymnastics School is an EQUAL OPPORTUNITY EMPLOYER and does not discriminate against applicants or employees on the basis of race, color, gender, marital status, religion, national origin, age, veteran status, disability or any other basis prohibited by local, state or federal law.

Authorization for Background Checks

I understand and agree that Diablo Gymnastics shall administer background checks on new employees having a sensitive position including but not limited to those positions which: 1) handle cash; 2) are responsible for facility security; or 3) have occasion to travel or be alone with children. Background checks may be waived if the person has had a significant previous experience with Diablo Gymnastics previous to acquiring a sensitive position. I further understand and agree that employment is conditional upon the results of these checks.

Signature:	Date:	