

Orlando Metro Employment Application

Orlando Metro Gymnastics – LB McLeod _____
 4658 L.B. McLeod Road, Orlando, FL 32811
 Ph 407-246-1200 Fx 407-246-1586

Orlando Metro Gymnastics – Avalon Park _____
 14170 E. Colonial Drive, Orlando, FL 32826
 Ph 407-207-4110 Fx 407-207-0611

Orlando Metro Gymnastics – Lake Mary _____
 1180 Emma Oaks Trail, Lake Mary, FL 32746
 Ph 407-333-0907

Orlando Metro Gymnastics & Swim School-Baldwin Park _____
 4915 New Board Street, Orlando, FL 32814
 Ph 407-644-0847 Fx 407-644-7738

Positions Applied For _____ Gymnastics Rec Coach _____ Gymnastics Team Coach
 _____ Summer Camp Counselor _____ After School Counselor
 Check All That _____ Cheerleading Coach _____ Birthday Party Specialist
 Applied _____ Receptionist _____ Swim Instructor
 _____ Boys Gymnastics Instructor _____ CDL Driver
 _____ Ninja Class Instructor _____ Special Needs Instructor

Last Name _____ First Name _____

Address _____ City _____ State _____ Zip _____

Preferred Contact Phone Number _____

E-Mail _____

Date Available To Start _____ Number of Hours Desired per Week _____

Hourly Rate Desired _____ (do not leave blank)

Specify specific hours of availability each day. Ex: 2:00pm-8:30pm (do not leave any blank)

Monday _____ Tuesday _____ Wednesday _____

Thursday _____ Friday _____ Saturday _____

Education & Training Experience

High School	Name of School	Course of Study	Years Completed	Diploma/Degree
College/Technical				
Graduate				
Other				
Highest Level of Competition	Gymnastics	Swimming	Cheerleading	Other

Specialized Training and Certifications

Total Number of Years of Coaching Experience	
Total Number of Years Life Guard Experience	
CERTIFICATIONS	Lifeguard Certification Expiration Date
Daycare Experience Years	Responsibilities
Sports Experience Years	Types of Sports
WSI Expiration Date	CPR Expiration Date
First Aid Expiration Date	USAG Safety Certification Expiration Date
UI100 Expiration Date	Safe Sport Expiration Date

Coaching Experience:

Preschool Gymnastics Yes _____ No _____
 Beginner Girls Gymnastics Yes _____ No _____
 Beginner Boys Gymnastics Yes _____ No _____
 Intermediate/Advanced Girls Gymnastics Yes _____ No _____
 Intermediate/Advanced Boys Gymnastics Yes _____ No _____
 Cheerleading (Stunts, Cheers, Dance) Yes _____ No _____
 Tumbling Yes _____ No _____
 Trampoline Yes _____ No _____
 Proficient in use of In-ground pits Yes _____ No _____
 Proficient in use of spotting belts Yes _____ No _____

Highest Skill You Can Teach & Spot

Girls

Vault _____
 Uneven Bars _____
 Beam _____
 Floor _____
 Trampoline _____

Boys

Pommel Horse _____
 P. Bars _____
 High Bar _____
 Vault _____
 Floor _____

Employment Experience (Start With Your Most Recent Employment)

Dates _____ Employer _____

Job Title _____ Hourly Rate _____ Reason for leaving _____

Job Responsibilities _____

Supervisor's Name _____ Contact # _____

Dates _____ Employer _____

Job Title _____ Hourly Rate _____ Reason for leaving _____

Job Responsibilities _____

Supervisor's Name _____ Contact # _____

Dates _____ Employer _____

Job Title _____ Hourly Rate _____ Reason for leaving _____

Job Responsibilities _____

Supervisor's Name _____ Contact # _____

Professional References

Name _____

Address _____

Phone #s _____

Name _____

Address _____

Phone #s _____

Additional Information

Please list additional activities, certifications, awards, experience or any other information which you believe would be helpful in the review of your application

Personal References:

Name _____

Address _____

Contact #s _____

How Acquainted _____

Number of Years Acquainted _____

Name _____

Address _____

Contact #s _____

How Acquainted _____

Number of Years Acquainted _____

Do you have any physical limitations Yes _____ No _____

If yes, please explain _____

Do you have a car for transportation? Yes _____ No _____

If hired, would you be able to present evidence of your U.S. citizenship or proof of your legal right to work in the United States? Yes _____ No _____

In case of an emergency contact

Name _____

Contact #s _____

Name _____

Contact #s _____

I certify the facts contained in the application are true and complete to the best of my knowledge and I understand, if employed, falsified statements on this application are grounds for dismissal. I authorize investigation of all statements contained herein and of references listed above.

I also agree and encourage a complete background check on myself if Elite Gymnastics of Orlando, Orlando Metro Gymnastics, Orlando Metro Gymnastics – Avalon Park, Orlando Metro Gymnastics & Swim School-Baldwin Park, or Orlando Metro Gymnastics – Lk Mary deem it necessary. This investigation may include investigation of my current and former employers and educational institutions.

I release, hold harmless and agree not to sue or file any claim of any kind against my current or former employer or educational institution, any officer or employee or either that in good faith furnishes written or oral references requested by Elite Gymnastics of Orlando, Orlando Metro Gymnastics, Orlando Metro Gymnastics – Avalon Park, Orlando Metro Gymnastics & Swim School-Baldwin Park, or Orlando Metro Gymnastics – Lk Mary to complete the background investigation.

If hired, I also agree to drug screening at the discretion of Elite Gymnastics of Orlando, Orlando Metro Gymnastics, Orlando Metro Gymnastics – Avalon Park, Orlando Metro Gymnastics & Swim School-Baldwin Park, or Orlando Metro Gymnastics – Lk Mary.

Applicant Signature

Date

Applicant Printed Name

“YES” answers to the following four questions will not necessarily result in denial of employment. We will consider all the circumstances, including the date and nature of events which have led to the actions described below. Your written explanation will assist us in determining your eligibility and suitability for employment. Attach additional information if necessary.

- Have you ever been convicted of, admitted committing, or are you awaiting trial for any crime (excluding only minor traffic violations not involving any allegation of drug or alcohol impairment). You must answer YES even if the matter was later dismissed, deferred, vacated or expunged. If you answer YES you must provide dates of the proceedings, the court where the proceedings occurred, a statement of the accusation against you and the final disposition of the case (s).

YES _____ NO _____

Explanation _____

- Have you ever been dismissed (fired) from any job, or resigned at the request of your employer, or while charges against you or an investigation of your behavior was pending? You must answer YES even if the matter was later resolved with any form of settlement or severance agreement, regardless of its 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.

YES _____ NO _____

Explanation _____

- 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 now pending against you before any licensing, certification or other regulatory agency or body, public or private? If you answer “YES” you must provide the dates of the proceedings, name, address and telephone number of the agency or body where proceedings took place, a statement of the accusations against you and the final disposition.

YES _____ NO _____

Explanation _____

- 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 body and a statement of the accusations against you.

- YES _____ NO _____

Explanation _____

Signature

Date

Attach a copy of driver's license or passport, CPR Card, USAG Membership Card and any Certifications.