

Office Use Only

Interview Date _____
 by _____
 Date of Hire _____
 Training Completed _____
 W2 ☐ DL/SS copy ☐
 Start _____ NTY sent? ☐



Mountain Gymnastics Training Center, Inc.
 419 E. Stuart St.
 Fort Collins, CO 80525
 Phone: 970-482-3118 Fax: 970-493-4095
www.mountain-kids.com

Employment Application

Today's Date _____

Please check all areas of interest:

Gymnastics Instructor ☐

Dance Instructor ☐

Classroom Preschool Teacher ☐

Ninja Instructor ☐

Transportation-Driver ☐

Barista/Retail ☐

Office ☐

Personal Data

 Last Name First Name Middle E-Mail Address

 Local Address City State Zip

 Local Phone # Mobile Phone# Date of Birth

Name and Address of Closest Relative (Not currently living with)

Name _____ Relationship _____ Phone _____
 Address _____ City/State/Zip _____

Are you a citizen of the USA or have a legal right to work in this country? Yes ___ No ___

Have you ever been convicted of anything other than a traffic violation? Yes ___ No ___

If yes, please explain. _____

Have you worked for Mountain Gymnastics before? Yes ___ No ___ If yes, what position did you have and under what conditions did you leave employment? _____

Are you currently a student? ___ If yes, where? _____ Year in school _____

What major are you working toward? _____

How many hours/week are you interested in working? _____

Do you have transportation? _____

What hourly wage would you expect to make? _____

Our Mission Statement

Our Mission at Mountain Gymnastics states that we exist to add value to EVERYONE that enters; students, parents and staff. We exist to make a positive difference in the lives of our students, their families, our staff and the quality of life in our community. Safety (physical and emotional) is First, Foremost and Always at the forefront of what we do with respect, trust, teamwork and communication in a positive, open and forthright manner following in importance.

Employment Data

Company Name

Address

Phone

Name of immediate supervisor

☐

I am no longer employed at this company

☐

It is OK to contact this person

☐

Please do not contact this person

Start wage \$

Final wage \$

Reason for leaving.

Start Date ____/____/____/

Final Date ____/____/____

Job title or position

Describe your duties and responsibilities

Company Name

Address

Phone

Name of immediate supervisor

☐

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☐

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☐

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Start wage \$

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Start wage \$

Final wage \$

Reason for leaving.

Start Date ____/____/____/

Final Date ____/____/____

Job title or position

Describe your duties and responsibilities

Educational Data

	Name , City & State	Year Graduated	Years completed	Major/Course Study
High School			1 2 3 4	
College			1 2 3 4 +	

Describe honors, internships, specialized training, awards, certifications, volunteer experience or time as a student or performer that would help qualify you for the position for which you are applying.

Understanding & Agreement (please read each statement carefully)

I certify that the statements given on this application or during an interview are true and complete and I authorize investigation of same with exception of contacting my current employer if I have so requested in this document. I have read and agree to the above statement. **Initial here:** _____

I understand that if I am hired that any false, incomplete or misleading information given herein or during an interview shall result in immediate termination. I have read and agree to the above statement. **Initial here:** _____

I authorize the references given on this application and during any interview to give to representatives of Mountain Gymnastics Training Center, Inc. any and all information concerning my previous or current employment and any pertinent information they may have, personal or otherwise, 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. **Initial here:** _____

I understand that if I am hired my continued employment is contingent upon my successful performance during a new hire period of 90 days. I have read and agree to the above statement. **Initial here:** _____

I understand that if I am hired my ongoing employment will be AT WILL meaning employment may be terminated by either party at any time with or without reason and with or without notice. I further understand that this AT WILL agreement cannot be changed in any way except through a written understanding signed by the Company President. I have read and agree to the above statement. **Initial here:** _____

At Mountain Gymnastics, teaching physical education skills to children or generally supervising children in a physical environment sometimes requires quick or unexpected movements including lifting or catching (spotting) children weighing up to 150lbs or more. Additionally, teaching positions also often 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 position(s) for which you are applying.

I am able to perform the physical requirements of the position(s) for which I am applying without jeopardizing my safety or the safety of Mountain Gymnastics' students, clients, guests, coworkers or others. **Initial here:** _____

Signature _____ Date _____

Mountain Gymnastics Training Center, Inc. is an EQUAL OPPORTUNITY EMPLOYER and does not discriminate against applicants or employees on the basis of race, color, gender, marital status, religions, national origin, age, veteran status, disability or any other basis prohibited by local, state or federal law. No question on this application is intended for or will be used for the purpose of limiting or excusing any applicant's consideration for employment.

Authorization For Background Checks

Mountain Gymnastics Training Center, Inc.'s number one concern is to provide a safe and happy environment for its students. To that end, please know that Mountain Gymnastics Training Center, Inc. performs background checks on employees.

I understand and agree that the Company will administer background checks on me and that initial and continued employment is conditional upon the results of these checks.

Signature _____ Date _____

Three Character References may be Required for Employment



Please list three names and phone numbers of people that we may contact for a character reference on you.
The character references describe your suitability for employment at Mountain Gymnastics.

1. _____ Phone: _____
2. _____ Phone: _____
3. _____ Phone: _____



Summer Work Availability 2022

Please place an X on days that you are **NOT** available

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Training Week	May 22	23	24	25	26	27	28
Week 1	29	30 	31 First Day of Camp	June 1	2	3	4
Week 2	5	6	7	8	9	10	11
Week 3	12	13	14	15	16	17	18
Week 4	19	20	21	22	23	24	25
Week 5	26	27	28	29	30	July 1	2
Week 6	3	4 	5	6	7	8	9
Week 7	10	11	12	13	14	15	16
Week 8	17	18	19	20	21	22	23
Week 9	24	25	26	27	28	29	30
Week 10	31	August 1	2	3	4	5	6
Week 11	7	8	9	10	1	12 Last Day of Camp	13

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