Victory Elite Employment Application

www.victoryelitegyms.com

☐ Victory Elite
12252 SW 128 CT
Miami, FL

☐ Victory Elite Central
7265 NW 74th St
Medley, FL 333166

Personal Information

Full Name:	Date of Birth:
Address:	
Email:	
Preferred Contact #:	

Position Information

Position Applied For:	
Date Available to Start:	Number of Hours Per Week:
Hourly Rate Desired (Do not leave blank) :	

Specify specific hours of availabilty each day. Ex: 2:00pm - 8:30pm)

Monday:	Tuesday:	Wednesday:
Thursday:	Friday:	Saturday:

Education & Training Experience

	Name of School	Course of Study	Years Completed
Highschool			
College/Technical			
Graduate			
Other			
Highest Level of Competition:			

Gymnastics

Total Number of Years Coaching Experience:
USAG#
Safe Sport Expiration Date: Safety Certification Expiration Date:
U100 Yes / No
First Aid/CPR 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)

Employer:	Dates:
Address:	
Job Title:	Hourly Rate:
Reason for leaving:	
Job Responsibilities:	
Supervisor's Name:	Contact #:

Employer:	Dates:
Address:	
Job Title:	Hourly Rate:
Reason for leaving:	
Job Responsibilities:	
Supervisor's Name:	Contact #:

Employer:	Dates:
Address:	
Job Title:	Hourly Rate:
Reason for leaving:	
Job Responsibilities:	
Supervisor's Name:	Contact #:

Professional References

Reference Name:

Address:

Phone Number:

Reference Name:

Address:

Phone Number:

Reference Name:

Address:

Phone Number:

Reference Name:

Address:

Phone Number:

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.

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 or 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 Victory Elite Gymnastics 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 Victory Elite Gymnastics to complete the background investigation.

If hired, I also agree to drug screening at the discretion of Victory Elite Gymnastics.

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 addition 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 of 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

_____

_____

Applicant Signature:	Date:
Applicant Printed Name:	

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