



DANSVILLE GYMNASTICS

JUNIOR COACH APPLICATION

Application information

Full name:	Last	First	M.I.	DOB:			
Address:	Street address			Apt/Unit #	Cell:		
	City	State	Zip Code		Email:		
Date Available:							
Position applied for:							
Are you currently enrolled in classes at DG?	Yes <input type="checkbox"/>	No <input type="checkbox"/>					
Are you available on Saturdays?	Yes <input type="checkbox"/>	No <input type="checkbox"/>					
Are you available weekday afternoons?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, specify.				
Do you have any limitations (physical or other)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, explain?				

Experience

Gym or Cheer:	Where?					
From:	To:	Currently participating?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Season:	
Coaching:	Where?					
From:	To:	Currently coaching?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Ages taught:	
Babysitting:	Kids age:					
From:	To:	Currently working?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Other info:	

References

Please list three professional references.

Full name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____ Email: _____

Full name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____ Email: _____

Full name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____ Email: _____

Disclaimer and signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____

