



## EMPLOYMENT APPLICATION

West Valley Gymnastics School  
1190 Dell Ave, Unit I, Campbell, CA 95008  
Phone 408 374-8692 Fax 408 866-4960

### Three Character References Required for Employment

To be hired at West Valley Gymnastics School, you are required to supply three references which attest to your suitability for employment at this facility. **References MUST be on file before the hiring process can be completed.** Please see the attached envelope for instructions.

West Valley Gymnastics School is an Equal Opportunity Employer. West Valley Gymnastics School does not unlawfully discriminate on the basis of race, color, religious creed, age, sex, disability, family care status, veteran status, place of national origin or any other basis protected by law.

**\*Please print and complete all sections entirely, use N/A if not applicable. Application will not be considered if it is incomplete or illegible.**

#### PERSONAL INFORMATION

Name: (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_ SS#: \_\_\_\_\_

Address: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Email \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ Alternate Phone: (\_\_\_\_) \_\_\_\_\_

Have you ever applied to, or worked for West Valley Gymnastics School before? \_\_\_\_\_

If yes, when? \_\_\_\_\_

Are you 18 years of age or older? \_\_\_\_\_

Are you a citizen of the USA or have a legal right to work in this country? \_\_\_\_\_

How did you learn about us? \_\_\_\_\_

State briefly why you would like to work for West Valley Gymnastics School:

\_\_\_\_\_

\_\_\_\_\_

Have you in the last 10 years been convicted of a felony (excluding any sealed or expunged convictions)?

*(NOTE: No applicant will be denied employment solely on the grounds of a conviction of a criminal offense. The nature of the offense, the date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)*

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

#### EMPLOYMENT DESIRED

Position you are applying for? \_\_\_\_\_ Full-time or part-time? \_\_\_\_\_

If part-time, hours per week desired: \_\_\_\_\_ Are you available for work on weekends? \_\_\_\_\_

Days of the week and hours you are available to work: \_\_\_\_\_

If hired, on what date could you start work? \_\_\_\_\_

Hourly rate of pay or monthly salary desired: \_\_\_\_\_



## SPECIAL SKILLS

Do you speak, write or understand any foreign languages? \_\_\_\_\_

If yes, which language(s)? \_\_\_\_\_

Do you have any experience, training, qualifications or skills which you feel make you especially suited for work at West Valley Gymnastic School ? \_\_\_\_\_ If yes, explain in detail below:

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Professional Society Memberships: \_\_\_\_\_

Licenses (list states): \_\_\_\_\_

**Please Read and Initial Each Paragraph Below (if there is any part of this page you do not understand, please ask the interviewer about it before signing).**

I hereby authorize West Valley Gymnastics School to thoroughly investigate my references, work records, education and other matters related to my suitability for employment and, further, authorize my current and former employers to disclose to the company any and all letters, reports and other information pertaining to my employment with them, without giving me prior notice of such disclosure. In addition, I hereby release West Valley Gymnastics School, my current and former employers, and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

I understand that if offered employment, the offer may be contingent on my passing a pre-employment alcohol and drug screen and a pre-employment physical. By signing this application, I voluntarily agree to submit to a pre-employment alcohol/drug screen and pre-employment physical upon request. I understand that failure to pass the alcohol/drug screen and/or physical will result in withdrawal of the employment offer.

If hired, I also agree to submit to alcohol or drug testing as a condition of employment. I agree that West Valley Gymnastics School may conduct alcohol or drug screening at its sole discretion with or without notice. I also understand that refusal to submit to an alcohol/drug screen will be considered a voluntary resignation of employment.

I understand that nothing contained in the application or conveyed to me during any interview which may be granted is intended to create an employment contract, implied or explicit, between me and West Valley Gymnastics School. In addition, I understand and agree that if I am employed, my employment relationship with West Valley Gymnastics School is strictly voluntary and at our mutual will. I understand that if employed, my employment is for no definite period and may be terminated at any time, with or without prior notice, with or without cause or reason, at the option of either myself or West Valley Gymnastics School, and that no promises or representations contrary to the forgoing are binding on West Valley Gymnastics School unless made in writing and signed jointly by the President/CEO and myself.

I understand and agree that any future changes in my title, duties, compensation, working conditions, and/or West Valley Gymnastics School benefits, policies or procedures will not alter our at-will and arbitration agreements.

I understand that if offered employment, I will, as a condition of employment, be required to submit proof of my identity and legal right to work in the United States on my first day of employment. If the position applied for requires driving in the course of work, I understand that I will be required to possess a current and valid California driver's license and understand that I will be required to provide a copy of my official driving record and proof of insurance.

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement on this application or on any documents used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

My signature below certifies that I have read and understand this complete page, and agree to the terms and conditions outlined in this document.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

## Employee Statement Background / Reference Authorization



Date: \_\_\_\_\_

1. The background information supplied by an applicant for a position opening will be checked by West Valley Gymnastic School or an outside reference checking service to ensure the accuracy of the data furnished and the past performance record of the candidate.
2. I authorize West Valley Gymnastic School to make such investigations and inquiries as may be necessary in arriving at an employment decision. I hereby release employers, schools, or persons from all liability in responding to inquiries in connection with my application for employment.
3. I should not resign my current employment until I have received a formal offer of employment, in writing, signed by a West Valley Gymnastic School employment representative.
4. West Valley Gymnastic School retains the right to hire the person who appears to best fit its needs at this time. There will not be an explanation (unless specifically required by law) as to what factors went into this decision.
5. The answers given to West Valley Gymnastic School representatives are true and complete to the best of my knowledge. In the event of employment, any significant misstatements or omissions later discovered in my background may be cause for my dismissal from West Valley Gymnastic School.

\_\_\_\_\_  
Candidate's Signature

\_\_\_\_\_  
Print Full Name

\_\_\_\_\_  
Social Security Number

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