



Dominique Moceanu Gymnastics Center

Gymnastics, Camps, Yoga & More

Application for Office Employment

[Pre-Employment Questionnaire]

Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, handicap, or veteran status.

DMGC
734 N Progress Drive
Medina, Ohio 44256
330-952-2767

Today's Date _____

First Name _____ Last Name _____

Are you over 18? Yes _____ or No _____

Have you ever used another name? Yes _____ or No _____

If yes, please state the full name you've used: _____

Street Address _____

City _____ State _____

Zip Code _____

Home Phone _____

Mobile Phone _____

E-mail address (print) _____

Name and address of parent or guardian if applicant is a minor:

Cell # _____

What prompted you to apply here? _____

What is your desired rate of pay? _____

How many hours per week do you desire? _____

When can you start? _____

Have you ever been convicted of a crime that has not been expunged by the court, other than a minor traffic offense? Yes _____ OR No _____

Answering "Yes" does not constitute an automatic bar to employment. Such factors as age and date of conviction, seriousness and nature of the crime, and rehabilitation will be considered.

If yes, please provide details (dates and location for all convictions)

EDUCATION:

School Name _____

Location _____

Course of Study _____

No. of Years Completed _____

Did You Graduate? _____

#2 SCHOOL

School Name _____

Location _____

Course of Study _____

No. of Years Completed _____

Did You Graduate? _____

Hours available to work: (8:00am-3:00pm/2:00 or 3:00pm-9:00pm)

Mon. - _____

Tues. - _____

Wed. - _____

Thur. - _____

Fri. - _____

Sat. - _____

Sun. - _____

Why would these hours work for you? _____

Have you ever been dismissed from employment or laid off? _____

Why? _____

Can you, after employment, submit verification of your right to work in the United

States? _____

Check off areas you are currently certified in:

USAG Safety _____ First Aid Certified _____

CPR Certified _____ Any other certifications? _____

Please list any job-related organizations, professional clubs societies or associations to which you belong. You may omit any that indicate your race, religion, national origin, national origin, sex, age, ancestry, etc.

Our hours vary from week to week and occasionally you may be asked to stay late, leave early, or come in and sub on your day off. Do you foresee any problems with this?

FORMER EMPLOYERS

List last three employers, starting with the most recent one first. If you do not have former employers, please provide three professional and/or character references.

FROM (MONTH/YEAR): _____ TO (MONTH/YEAR): _____

COMPANY/BUSINESS _____

SUPERVISOR NAME _____

PHONE NUMBER _____

EMAIL _____

SALARY _____

POSITION_____

REASON FOR LEAVING_____

If currently employed, may we contact your current employer?

#2 Employer

FROM (MONTH/YEAR): _____ TO (MONTH/YEAR): _____

COMPANY/BUSINESS _____

SUPERVISOR NAME _____

PHONE NUMBER _____

EMAIL _____

SALARY _____

POSITION _____

REASON FOR LEAVING _____

If currently employed, may we contact your current employer?

#3 Employer

FROM (MONTH/YEAR): _____ TO (MONTH/YEAR): _____

COMPANY/BUSINESS _____

SUPERVISOR NAME _____

PHONE NUMBER _____

EMAIL _____

SALARY _____

POSITION _____

REASON FOR LEAVING _____

If currently employed, may we contact your current employer?

Which of these jobs did you like best? Why? _____

What did you like least? Why? _____

Are you proficient in Microsoft Office Suite? _____

Typing/wpm? _____

Do you have any bookkeeping experience? _____

If yes, explain: _____

What characteristics do you have that would make you a valuable employee to have on staff?

Please describe in detail how you would handle an irate parent.

It is a slow day and you notice that you have some free time. What do you do with that free time?

What do you think is the most important goal to achieve in a business such as this?

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, and release all parties from all liability for any damage that may result from furnishing same to you.

I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice and with cause."

Realizing this is a business of children, I understand that by signing this I am allowing Dominique Moceanu Gymnastics Center to perform various background checks.

Signature _____

Date _____