

# Employment Application

Dakota Star Gymnastics is in association with, but is not officially included as a part of, Mandan Parks and Recreation. This company's policies are specific to the operation of Dakota Star Gymnastics and the management of its employees.

It is the policy of the company to provide equal opportunity with regard to all terms and conditions of employment. The company complies with all federal and state laws prohibiting discrimination on the basis of race, color, religion, creed, national origin, gender, disability, veteran status, age or any other protected characteristic.

**Applicant Name:** \_\_\_\_\_

Home Phone: \_ (\_\_\_\_) \_\_\_\_\_ Cell Phone: \_ (\_\_\_\_) \_\_\_\_\_

Parent Phone: \_ (\_\_\_\_) \_\_\_\_\_ Emergency: \_ (\_\_\_\_) \_\_\_\_\_

Street/Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address (If different from above): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Position applied for: ☐ Recreational Coach ☐ Competitive Coach ☐ Volunteer  
☐ Office Personnel ☐ Recreational Director ☐ Program Director

Days available: ☐ Mon ☐ Tues ☐ Wed ☐ Thurs ☐ Fri ☐ Sat ☐ Sun

Hours available (Select all that apply to weekdays): ☐ Daytime: 9 a.m.-12 p.m. ☐ Daytime: 1 p.m.-4 p.m.  
☐ 4 p.m.-5 p.m. ☐ 5 p.m.-6 p.m. ☐ 6 p.m.-7 p.m. ☐ 7 p.m.-8 p.m.

On what specific date (month and day) would you be available to begin work: \_\_\_\_\_

Previous experience in the position applied for: \_\_\_\_\_

Experience related to the position applied for, if the position has not been previously held: \_\_\_\_\_

Have you been employed at Dakota Star Gymnastics in the past? ☐ YES ☐ NO

If so, when?: From \_\_\_\_\_ to \_\_\_\_\_  
DATE DATE

Do you have a legal right to be employed in the United States of America (Proof is required if hired)? ☐ YES ☐ NO

Are you under the age of 18?: ☐ YES ☐ NO

If you are under 18, will you provide a work permit if required? ☐ YES ☐ NO

Desired starting wage: \$ \_\_\_\_\_ (Minimum wage is \$7.25 in North Dakota as of January 2012)

## Educational background:

### Elementary/Grammar School

Name: \_\_\_\_\_ City: \_\_\_\_\_

### Middle/High School

Name: \_\_\_\_\_ City: \_\_\_\_\_

Did you graduate? ☐ YES ☐ NO ☐ NOT YET Are you still enrolled?: ☐ YES ☐ NO

### College

## Office Use Only

Employee #: \_\_\_\_\_

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

Starting Wage: \_\_\_\_\_

Position: \_\_\_\_\_

Notes: \_\_\_\_\_

Name: \_\_\_\_\_ City: \_\_\_\_\_

Degree/Diploma: \_\_\_\_\_

Did you graduate?

☐ YES☐ NO

### Graduate School

Name: \_\_\_\_\_ City: \_\_\_\_\_

Degree/Diploma: \_\_\_\_\_

Did you graduate?

☐ YES☐ NO

## Previous Employers/References

Please list three (3) employers and/or references who are not immediate or extended family members of yours:

1. Company Name: \_\_\_\_\_ City: \_\_\_\_\_ Phone number: \_\_\_\_\_  
Manager/Direct supervisor Name: \_\_\_\_\_ Wage: \_\_\_\_\_  
Position: \_\_\_\_\_ Employed from: \_\_\_\_\_ to \_\_\_\_\_  
DATE DATE

Reason for leaving: \_\_\_\_\_

2. Company Name: \_\_\_\_\_ City: \_\_\_\_\_ Phone number: \_\_\_\_\_  
Manager/Direct supervisor Name: \_\_\_\_\_ Wage: \_\_\_\_\_  
Position: \_\_\_\_\_ Employed from: \_\_\_\_\_ to \_\_\_\_\_  
DATE DATE

Reason for leaving: \_\_\_\_\_

3. Company Name: \_\_\_\_\_ City: \_\_\_\_\_ Phone number: \_\_\_\_\_  
Manager/Direct supervisor Name: \_\_\_\_\_ Wage: \_\_\_\_\_  
Position: \_\_\_\_\_ Employed from: \_\_\_\_\_ to \_\_\_\_\_  
DATE DATE

Reason for leaving: \_\_\_\_\_

1. Reference Name: \_\_\_\_\_ City: \_\_\_\_\_ Phone number: \_\_\_\_\_  
How do you know this person? \_\_\_\_\_

2. Reference Name: \_\_\_\_\_ City: \_\_\_\_\_ Phone number: \_\_\_\_\_  
How do you know this person? \_\_\_\_\_

3. Reference Name: \_\_\_\_\_ City: \_\_\_\_\_ Phone number: \_\_\_\_\_  
How do you know this person? \_\_\_\_\_

I certify that all information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected, and if I am employed, my employment may be terminated at any time.

In consideration of my employment, I agree to conform to the company's rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause, and with or without notice, at any time by the company. I understand that no company representative, other than its president or director, and then only when in writing and signed by the president or director, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_