

Tumble Time Gymnastics

Happy Healthy Families

Application for Employment Tumble Time Gymnastics & The Magic Tumble Bus

1379 N Cloverdale Rd Boise, Idaho 83713 208-375-0063

www.tumbletimegymnastics.com

Today's Date	Hours	Needed	PT or FT
Full Legal Name			
Address			
City	State	Zip	
Phone	C	ell	
Email Address			
Job Applying for:			
Education please circle h 1. If you did not complete diploma? Yes or No 2. Circle number of years Name and Location of In	e high school, do y	ou have a high s	chool equivalency
Institution			
Hours Degr	ee Received		
Major or Specialty			
Minor	Γ	Dates Attended _	
Please list any experience	e with children		
List any experience with	gymnastics:		

Do you have you	r CPR & First Aid:	Yes or No		
Do you have you	ır Child Care Licens	se: Yes or No		
Do you have a C	DL drivers license:	Yes or No If yes, which	class:	
How is your driv	ing record?			
Please list jobs s	starting with your	current one first.		
Employer				
Address				
Phone		Job Title		
Duties				
Type of Busines	SS			
Immediate Supe	ervisor	Title		
Salary (start)	(finish)	Dates(from)	(to)	
Reason for leavi	ing?			
Full-time	Part-time	Hours per week		
Number of emp	loyees you supervi	sed (if any):		
May we contact	this employer:			
Employer				
Address				
Phone		Job Title		
Duties				
Type of Busines	SS			
Immediate Supe	ervisor	Title		
Salary (start)	(finish)	Dates (from)	(to)	
Reason for leavi	ing?			
Full-time	Part-time	Hours per week		
Number of emp	loyees you supervi	sed (if any):		
May we contact	this employer:			

Employer			
Phone		Job Title	
Duties			
Immediate Sup	ervisor	Title	
Salary (start)	(finish)	Dates(from)	(to)
Reason for leav	ing?		
Full-time			
Number of emp	oloyees you supervis	ed (if any):	
May we contact	t this employer:		
Employer			
Address			
Phone		Job Title	
Duties			
Type of Busines	SS		
		Title	
Salary (start)	(finish)	Dates (from)	(to)
Reason for leav	ing?		
		Hours per week	
Number of emp	oloyees you supervis	ed (if any):	

Name	
11ame	
Address	
Phone	Relationship
Name	
Address	
Phone	Relationship
Name	
Address	
Phone	Relationship
st of my knowledge. I u use for dismissal. Tumb y investigation deemed ganization is authorized so hereby release such in	cts that are set forth in the above Job Application are true and complete to the inderstand that falsified statements on this form shall be considered sufficient le Time Gymnastics and The Magic Tumble Bus is hereby authorized to make necessary to verify the information, and any law enforcement or other to give all information relative to my employment, work habits, and character. Individuals, organizations and Tumble Time Gymnastics and the Magic Tumble any claim or damage that may result.
	Office Use Only
Comments:	