



Application for Employment

Athletes in Motion Gymnastics is an equal opportunity employer. To determine your qualifications, please provide the information below.

APPLICANT INFORMATION			
Full Name:		Date:	
Street Name:		Apt/Unit #:	
City:	Province:	Postal Code:	
Phone:	Email:		
Are you legally eligible to work in Canada? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Position Applied For: Coach in Training <input type="checkbox"/> Recreational Coach <input type="checkbox"/> Competitive Coach <input type="checkbox"/> Office <input type="checkbox"/>			

AVAILABILITY INFORMATION						
Looking for: Part Time <input type="checkbox"/> Full Time <input type="checkbox"/> Seasonal <input type="checkbox"/>						
Date Available to Begin Work:						
Availability for work at Pickering location (1503 Sandy Beach Road, Pickering, ON)						
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Availability for work at Ajax location (889 Westney Road South, Ajax, ON)						
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

EDUCATION and CERTIFICATIONS

Elementary School	From:	To:	Graduated: Yes <input type="checkbox"/>	No <input type="checkbox"/>
High School	From:	To:	Graduated: Yes <input type="checkbox"/>	No <input type="checkbox"/>
College	From:	To:	Graduated: Yes <input type="checkbox"/>	No <input type="checkbox"/>
University	From:	To:	Graduated: Yes <input type="checkbox"/>	No <input type="checkbox"/>
Other:	From:	To:	Graduated: Yes <input type="checkbox"/>	No <input type="checkbox"/>

Please list below any Certifications, Diplomas/Degrees that you have obtained. (This may include, but not limited to First Aid/CPR, Coaching certifications, and Schooling)

Type	Date Completed

INTERESTS and ACCOMPLISHMENTS:
 You may wish to list below any significant interests, awards, or accomplishments through volunteering or other experiences

PREVIOUS EMPLOYMENT		
Company:	Supervisor:	
Address:		Phone:
Job Title:	From:	To:
Responsibilities:		

May we contact your previous employer for reference? Yes No

Company:	Supervisor:	
Address:		Phone:
Job Title:	From:	To:
Responsibilities:		

May we contact your previous employer for reference? Yes No

REFERENCES:		
Name:	Relationship:	Phone:
Name:	Relationship:	Phone:

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 any false or misleading information in my application or interview may result in my release.	
Signature:	Date:

*Please feel free to attach a Resume, Cover Letter or other Certifications