



Mail to: 103 Gold Street, Agawam, MA 01001

Email to: info@daggettgymnastics.com

New Employee Application

Today's Date _____

First Name _____ Last Name _____

Birthday _____ Home Phone _____

Work Phone _____ Cell Phone _____

Emergency Phone _____ E-Mail _____

Street _____ City _____ Zip _____

S.S.# _____

PROFESSIONAL MEMBERSHIP

Prof. # _____

Start Date _____

Expiration Date _____

CERTIFICATES (please check and list expiration dates next to them)

Safety certified _____ CPR Certified _____ First Aid Certified _____

Put an "X" next to the days and times you can work.

| | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
|-------------------------|--------|---------|-----------|----------|--------|----------|--------|
| Mornings 8:30-12:00 | | | | | | | |
| Afternoon 12:00-3:00 | | | | | | | |
| Evenings 3:00-9:00 | | | | | | | |

How many hours do you want to work weekly? _____

What level of classes do you want to teach? _____

Will you be available for training? _____

Are you interested in doing Birthday Parties on the weekend? _____

Please list any relevant experience _____

REFERENCES

Name

Contact #

1. _____

2. _____

3. _____