

Employment Opportunity City of Arcata Recreation Division Gymnastics Instructor

Do you like working with Kids? Do you enjoy gymnastics? This could be the job for you!

<u>General Job Information</u>: Instructors teach and lead a variety of gymnastics related movement and exercise games and activities. Instructors develop weekly lesson plans, set up and take down equipment and maintain a safe environment at all times. Classes run for 7 to 8 week in 5 sessions throughout the year including summer.

Our <u>Gymini Crickets gymnastics</u> program serves youth ages 15 months to 6 years of age. Classes are 45 mins. long and are held at the Judo Hut, located next to City Hall. The objective of the program is to encourage the development of gross motor skills, strength, and coordination in addition to listening and social interaction skills.

The <u>Artistic Gymnastics</u> program is for youth six years and older, learning beginning and intermediate gymnastics skills on all apparatus, including uneven bars, vault and balance beam, along with basic tumbling skills. The emphasis of this program is on developing gymnastics skills in a safe, fun environment while enhancing social skills, self-esteem and self-confidence.

<u>Applicant Qualifications:</u> Applicants must be at least 18 years of age. We are looking for enthusiastic, reliable candidates who have experience and enjoy working with youth. Gymnastics experience is a plus. Additional training will be provided.

Application Deadline: Until Filed

Applications are available on our website at www.cityofarcata.org/rec or at the Arcata Recreation Division office located at Arcata City Hall, corner of 7th and F Streets Office hours are Monday-Friday, 9-5 p.m. Call Heather Schmidt at 822-7091 for more information.

The City of Arcata does not discriminate on the basis of political opinions or affiliations, race, color, ancestry, national origin, religious creed, sex, age, disability, medical condition, marital status, sexual preference, or because of the exercise of his/her rights under Section 3502 of the Government Code of the State of California relating to participation in the activities of



Position Applied For:	



PERSONNEL USE ONLY

Applicant No._____

EMPLOYMENT APPLICATION

	LIVIFL	OTIVILI	VI AFFEICATION
Last Name	First I	Name	MI
Address	City/State	Zip	Telephone
Social Security Number	Driver License Number	Class	Email Address
If under eighteen years of age: after an o	offer of employment can your	suhmit a	Can you, after an offer of employment, submit verification of your legal right to work in the
) No	submit a	United States? () Yes () No
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List any jobs you have held in the last ten years, starting with the most recent. Also include any RELATED work experience that is older than ten years. Include military and voluntary experience. (Please use additional sheets if necessary.) This section must be completed. Applications will be rejected if you write, "see resume", "see attached" or anything similar.

Employer's Name		Position Title:
Address/City/State/Zip		Describe Your Duties:
Telephone		
Supervisor		
Starting Date	Final Date	Reason for Leaving
Final Salary	Hours per week:	
Employer's Name		Position Title:
Address/City/State/Zip		Describe Your Duties:
Telephone		
Supervisor		
Starting Date	Final Date	Reason for Leaving
Final Salary	Hours per week:	
Employer's Name		Position Title:
Address/City/State/Zip		Describe Your Duties:
Telephone		
Supervisor		
Starting Date	Final Date	Reason for Leaving
Final Salary	Hours per week:	

Employer's Name		Position Title:		
Address/City/State/Zip		Describe Your Duties:		
Telephone				
Supervisor				
Starting Date	Final Date	Reason for Leaving		
Final Salary	Hours per week:			
Continue employment histo	ory on separate sheet/s of paper if ne	ecessary. Provide information in sa	ame format as presente	ed here.
		OUCATION AND TRAINING		
School	Name and Location of School	Course of Study	# of Years Completed	Degree/Diploma Received
High School				
College				
Licenses/Certificates	Issue/Expiration Dates	Issuer of License	Number if	Applicable
			<u> </u>	
1. Have you ever been emp	ployed by the City of Arcata?	_Yes No		
From	to	Department		
2. Are you related to anyon	ne currently employed by the City of	Arcata? YesN	No	
Name	Department		Relationship	
3. Have you ever been disc	charged or asked to resign from any	/ position? Yes No	0	
Name of Employer				
	victed of any crime, either misdement frecords are legally sealed or expu		No (Please or	nit any juvenile convictions or
The City, however, may coposition. *Notwithstanding application for violations of	where each offense occurred and densider the nature, date, and circum gany of the preceding, you should reflect the health and Safety Code Sections fory predecessor to those statutes.	stances of the offense as well as not disclose convictions that are of 11357, 11360, 11364, 11365, or	whether the offense is over two years old as o 11550, as those statut	s relevant to the duties of the of the date you complete this
5. a. Are you a California P b. If Yes, have you collec Yes 6. a. Have you been emplo b. If Yes, have you withd	the criminal record background procedublic Employees Retirement System and the procedure of	m(CalPERS) annuitant? Y eceding twelve (12) months, based employer within the last six months No	es No on prior temporary emp hs? Yes	oloyment with a public employer?
I certify under penalty of perjury incomplete, or incorrect stateme. City will investigate all informatio they may have concerning my e specified in Article XX, Section 3 physician (which may include a pure time).	nts may result in my disqualification from contained in this application and I authomore and I	this application is true and complete to the examination process or dismission or the examination process or dismission or the employers and educational arcata during the course of that invest the ernment Code Section 3100 et. Seq., thoosing, if required for the position for signed will be considered an at-will employed.	al from employment with institutions identified on the tigation. As a condition of to be fingerprinted, and which I am applying.	dge. I further understand that any false, the City of Arcata. I understand that the his application to release any information of employment I agree to sign an oath as to submit to a medical examination by a resign at any time for any reason, the City he contrary.
Signature		Date		

Applicant 1	Name:
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lease briefly de	scribe any expe	rience you ha	ve working wi	ith youth (paid	or nonpaid).
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