LA Tennis Inc. - Job Application Form

Section 1: Personal I	ntormation		
Full Name:			
Date of Birth:			
Address:			
City:	State:	Zip:	
Phone Number:			
Email Address:			
Section 2: Availabilit	у		
Are you available to w	ork weekends? []	Yes [] No	
Are you available to w	ork evenings? []Y	es []No	
What is your general a	availability? (Please	specify days and	hours):
Section 3: Qualificati	ons and Experienc	e	
1. Do you hold any of	the following certifica	ations? (Check all	that apply):
[] USPTA/RSPA Ce	rtification (Level:)	
[] PTR Certification	(Level:)	
[] First Aid/CPR Cer	tification		
[] Other (please spe	cify):		
2. Do you have experi	ence coaching tenni	s? []Yes []No)
	_		ng locations and duration:
3. Do you have experi	ence working with s _เ	pecific age groups	s? (Check all that apply):
[] Children (6-12)			
[] Teens (13-18)			
[] Adults			
[] Seniors			

4. Are you familiar with City of Los Angeles regulations for tennis instruction?	[]Yes	[] No
5. Which courts in Los Angeles have you been operating on currently? Please	e list:	
Section 4: Required Documents		
Please attach the following documents to your application:		
Valid Teaching Certifications (e.g., USPTA/RSPA, PTR)		
Proof of Insurance (Liability coverage)		
Safe Play Background Check Compliance		
Current TB Test (within the calendar year)		
First Aid/CPR Certification		
Resume		
Section 5: References		
Please provide two professional references:		
1. Name:		
Relationship:		
Phone Number:		
Email Address:		
2. Name:		
Relationship:		
Phone Number:		
Email Address:		
Deation C. Annii ant Arlm and dament		

Section 6: Applicant Acknowledgment

By signing below, I certify that all the information provided in this application is true and complete to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of facts may result in the rejection of my application or termination of my employment if hired.

Signature:
Date:
For Office Use Only:
Application Received By:
Date:
Notes: