

COA Dance Instructor Application

Date of Application: _____

Type of Tryout:

- Video Tape & Full-length Photo (Due March 1)
 Live Tryout (Call for Details) _____

Personal Information

Full Name _____

Social Security Number _____

Current Address (Street, City, State, Zip) _____

Summer Address (If Different) _____

Date Moving to Summer Address _____

_____/_____/_____

Date of Birth _____

Driver's License # _____

Cell Phone _____

Home Phone _____

E-mail Address _____

MALE FEMALE

Voluntary Applicant Survey

How did you learn about the position(s) for which you applied?

- Electronic / Computer Posting
 A current employee of COA
 A former employee of COA

Name _____

Voluntary Equal Employment Opportunity Survey

Providing this information is voluntary and your application and/or employment decision will not be adversely affected if you respond or decline to do so. We would appreciate your cooperation and assistance in our efforts to ensure equal opportunity employment. This data will be kept confidential.

Name _____ Date ____/____/____

Position(s) Applied For: _____

Gender _____ Birth Date ____/____/____

Ethnic Background: (Check one)

- Caucasian (Non-Hispanic) African American (Non-Hispanic)
 Hispanic Native American
 Asian / Pacific Islander Other _____

COA, Inc. is an Equal Opportunity Employer and does not discriminate on the basis of race, color, religion, sex, age, national origin, disability, veteran status, sexual orientation, or any other classification protected by federal, state, or local law.

Measurements

Height _____ Pant / Short Size* _____

Weight _____ Shirt Size** _____

Shoe Size _____

- * Men — Waist Size
* Women — XS, S, M, L
**All — XS, S, M, L, XL

General Questions

Do you have the following?

- A major credit card in your name?
 Membership with AAA?
 A valid Driver's License?
 A car available to drive to camps?*

*Note: You will not drive your own car more than 8 hours.

Date You Can Begin Work ____/____/____

Last Date You Can Work ____/____/____

Closest Major Airport _____

List any injuries or health problems that may affect your ability to work.

Have you ever been convicted of a crime, including child abuse or sex-related offenses? If yes, please explain.

Yes No

Note: A conviction is not necessarily the determining factor in the hiring process.

Applicant Statement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment.

This application for employment shall be considered active for a period of time not to exceed 180 days. If I wish to be considered for employment beyond this time period, I understand that I need to inquire as to whether or not applications are being accepted at that time.

I understand that neither this document nor any offer of employment from the employer constitutes an employment contract unless a specific document to that effect is executed by the employer and me in writing. If hired, I am free to resign at any time, just as the company is free to terminate my employment for any reason at any time including layoff and change in operation situations. I understand that my employment can be terminated at any time, with or without cause, and with or without notice, at the option of either the company or me. The company further reserves the right to change my compensation, duties, assignments, responsibilities, or geographical location of my job at any time, with or without cause. These provisions may be modified only in writing and signed by the officer of the company.

In the event of employment, I understand that false or missing information given in the application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer, which are hereby merged herein.

I waive all provisions of law forbidding colleges and universities that I attended, or past employers, from disclosing any information that they have acquired relevant to my employment. I consent that they may disclose such information to COA, Inc.

Signature of Applicant _____

Date _____



COA Dance Instructor Application

Dance Background

Check the groups that you currently dance with or have danced with in the past. For each category list Name, Years on Team, and Leadership roles.

High School Dance Team

Collegiate Dance Team

All Star Dance Team

Studio Dance

Personal Statements

Why do you feel you would make an outstanding COA Dance Instructor?

Please explain all performance, choreography, coaching, and teaching experience.

Note: We encourage applicants to submit any of the following: Letter of Recommendation, Résumé, Letter of Reference. Please attach additional pages if needed!

For Office Use Only

App. # Dance Ability

Jumps Overall

Leaps Comments

Turns

Skills Assessment

Please check all skills that you can perform consistently:

Turns

Chaîné

Piqué

Double Pirouette

Fouetté

Axel

Other _____

(Possible options: Turns a la Seconde, Triple Pirouette)

Leaps

Jeté

Leap a la Seconde

Switch

Other _____

(Possible options: Turning Switch Leap, Switch Open Leap, Switch Tilt)

Jumps

Toe Touch

Other _____

(Possible options: Ring Leap/Stag, Tilt Jump, Ronde Versé)

How To Do A Video Tryout

1. The VHS should consist of an introduction, which should include your:

- Name
- Dance Background (where you dance)
- Why you would like to be a COA Dance instructor

2. Applicants must then perform **5 to 6** 8-counts of the following routines (Please state the style before you begin each dance):

- Jazz
- Pom
- Hip Hop
- Lyrical
- Kick

3. Applicants must perform **all** skills listed under "Skills Assessment" (above) (Please state each skill before you perform it)

This video will become property of COA and cannot be returned. All applicants must label the video with their full name and city, plus attach a full-length photo to the application.

Mail to:
COA Cheer & Dance
Attn: Human Resources Staffing Department
3699 Paragon Drive
Columbus, Ohio 43228

