



## THE ROCK CLUB

# EMPLOYMENT APPLICATION

The Rock Club, LLC

130 Rhodes Street, New Rochelle, New York, 10469

**Application must be filled out COMPLETELY, write NA if item does not apply. We will not act on incomplete applications.**

### 1. General Info

Name: \_\_\_\_\_

Address (Street, City, State, Zip): \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: Cell: \_\_\_\_\_ Home: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Date of Application: \_\_\_\_\_

(For Applicants under 18 only)

**Position Desired** (Circle all that apply):

Front Desk   Belayer   Facilitator   Setter   Coach   Junior Program Instructor   Other: \_\_\_\_\_

**What days are you available to work?** \_\_\_\_\_

**Preferred total hours per week:** \_\_\_\_\_

**Compensation expectations?** (\$/hour or annual salary) \_\_\_\_\_

**Are you able to work a minimum of 4 shifts per month?** YES  NO

**Are you willing to periodically fill an emergency or holiday shift?** YES  NO

**Can you provide verification of your legal right to work in the U.S.?**<sup>1</sup> YES  NO

**Have you ever been convicted of a felony?**<sup>2</sup> YES  NO

**Have you ever had allegations of child abuse brought against you?** YES  NO

**Have you ever been asked to resigned or been fired from a job?** YES  NO

**Have you served in any military service?** (If no, skip to section 2) YES  NO

If yes, Country: \_\_\_\_\_ Branch: \_\_\_\_\_ Date Entered: \_\_\_\_\_

Nature of duties: \_\_\_\_\_

<sup>1</sup> At the time of employment

<sup>2</sup> (Do not include convictions that were sealed, eradicated, erased, expunged or marijuana-related convictions more than two (2) years old).



## 2. Climbing & Gym Experience

*Climbing experience is not necessarily a prerequisite for employment at The Rock Club. If you have climbing, setting or coaching experience on your resume, please attach and skip to the next section.*

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**Do you know how to belay?**

YES  NO

If no, are you willing to learn? Yes  No

**Do you own your own climbing equipment?**

YES  NO

If no, are you willing to purchase basic climbing gear (harness, belay device, two additional carabiners)? Yes  No

**Do you have Indoor climbing experience?** (Check all that apply)

Bouldering    Top Rope    Lead    None    Other: \_\_\_\_\_

**Where have you climbed indoors?** \_\_\_\_\_

**Do you have Outdoor climbing experience?** (Check all that apply)

Bouldering    Top Rope    Sport    Trad    None    Other: \_\_\_\_\_

**Where have you climbed outdoors?** \_\_\_\_\_

**How long have you been climbing?** \_\_\_\_\_

**What grades do you normally climb?** \_\_\_\_\_

**Have you ever participated in any climbing competitions?** (If yes, please describe)

\_\_\_\_\_

**Have you ever instructed any climbing, mountaineering, or rope related activities?** (If yes, please describe)

\_\_\_\_\_

**Do you have any experience coaching climbing teams or youth programs?** (If yes, please describe)

\_\_\_\_\_

**Have you ever set routes in a climbing gym or for competitions?** (If yes, please describe)

\_\_\_\_\_

**Please list any other relevant gym, outdoor, or climbing information below:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



### 3. Education

(Check off highest year attended, whether completed or not)

**HIGH SCHOOL** 1  2  3  4  Graduated? YES  NO

Name of High School: \_\_\_\_\_ Location: \_\_\_\_\_

Most recent GPA (Only for applicants currently in school): \_\_\_\_\_

Extracurricular activities (Only for applicants currently in school):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**COLLEGE/ UNIVERSITY (1)** 1  2  3  4  Graduated? YES  NO

Name: \_\_\_\_\_ Location: \_\_\_\_\_

Dates attended (From-To): \_\_\_\_\_ Major(s): \_\_\_\_\_

Most recent GPA (Only for applicants currently in school): \_\_\_\_\_

Degree(s): \_\_\_\_\_

**COLLEGE/ UNIVERSITY (2)** 1  2  3  4  Graduated? YES  NO

Name: \_\_\_\_\_ Location: \_\_\_\_\_

Dates attended (From-To): \_\_\_\_\_ Major(s): \_\_\_\_\_

Most recent GPA (Only for applicants currently in school): \_\_\_\_\_

Degree(s): \_\_\_\_\_

### 4. Personal Background

*Complete this section only if you are under age 18 or have never held a paying job.*

**Have you ever done any unpaid or volunteer work?** YES  NO

If YES, Please describe below:

\_\_\_\_\_  
\_\_\_\_\_

**Have you ever participated in any of our Junior Programs?** (Check all that apply)

Biners  RockHangers  Club Rock  Team Rock  Mini-Camps



## 5. Experience & Qualifications

Please list your previous work experience starting with your present or most recent job. **If you are handing in a resume with your application you may check the box below and skip to the next section.**

Resume is attached

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**EMPLOYER 1:** \_\_\_\_\_ Type of Business: \_\_\_\_\_

Location (City, State): \_\_\_\_\_ Phone: \_\_\_\_\_

Dates of Employment (To-From): \_\_\_\_\_

Full Time  Part Time

Name & Title of Supervisor: \_\_\_\_\_

Job title & Responsibilities:

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Reason for leaving or desiring to change:

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**EMPLOYER 2:** \_\_\_\_\_ Type of Business: \_\_\_\_\_

Location (City, State): \_\_\_\_\_ Phone: \_\_\_\_\_

Dates of Employment (To-From): \_\_\_\_\_

Full Time  Part Time

Name & Title of Supervisor: \_\_\_\_\_

Job title & Responsibilities:

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Reason for leaving or desiring to change:

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## 5. Experience & Qualifications Cont.

Please list your previous work experience starting with your present or most recent job. **If you are handing in a resume with your application skip to the next section.**

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EMPLOYER 3: \_\_\_\_\_ Type of Business: \_\_\_\_\_

Location (City, State): \_\_\_\_\_ Phone: \_\_\_\_\_

Dates of Employment (To-From): \_\_\_\_\_

Full Time  Part Time

Name & Title of Supervisor: \_\_\_\_\_

Job title & Responsibilities:

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Reason for leaving or desiring to change:

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## 6. References

Please list **at least 2 references** that we may contact.

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### REFERENCE 1

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

### REFERENCE 2

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

### REFERENCE 3 (Optional)

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_



## 7. Health & Medical

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Have you had a physical examination in the last 12 months? YES  NO

Do you have any physical limitations that might have a direct bearing on job performance?  
YES  NO

If YES, please describe:

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## 8. Other information

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Do you have a valid Driver's License? YES  NO

Do you have your own transportation to get you to and from work? YES  NO

If NO, how will you get to and from work in a timely, reliable fashion?

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Do you have any emergency medical training (first aid, CPR, EMT etc.)? YES  NO

If YES, please list dates and certification expirations:

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Do you have any experience with Rock Gym Pro? YES  NO

Do you have any other special skills that might be valuable at The Rock Club (e.g., computer skills, marketing experience, retail experience, sales, etc.)?

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How did you hear about the position you are applying for? \_\_\_\_\_

The Rock Club, LLC is a Smoke-Free workplace and an Equal Opportunity Employer. In the event an offer of employment is made, the offer will be subject to the applicant providing documentation proving identity and eligibility for employment in the U.S. as required by the Immigration Reform and Control Act of 1986.

**Please read the following statements and sign below:**

I understand that neither this application nor any communication or representation by any The Rock Club, LLC ("TRC") employee or manager is an offer of employment and that any oral or written statements to the contrary are hereby expressly disavowed and should not be relied upon by any prospective or existing employee. I further understand that as a condition of employment I may be required to sign an employment and confidentiality agreement in which you agree not to disclose any confidential information learned at The Rock Club. It in no way limits your ability to seek employment elsewhere.  
The information that I have provided on this application is accurate to the best of my knowledge and subject to confirmation by TRC. Any withholding of information or making false or misleading statements on this application could result in rejection for employment, or if employed, termination from TRC.  
Unless noted otherwise, I authorize the companies, organizations, schools or persons named in this application give TRC any information that TRC requests regarding my employment or academic history and I hereby release those companies, schools or persons from any and all liability for any damage whatsoever for providing this information to TRC. If you decide to undertake a background check and/or engage an investigative consumer reporting agency to report on my credit and personal history, I authorize you to do so. If a report is obtained, you must provide, at my request, the name of the agency so I may obtain a copy containing the nature and substance of the information in the report.

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Applicant's Signature

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Parent or Legal Guardian  
Signature (If Applicant is under 18)

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Today's Date