

## APPLICATION FORM

## ABSOLUTE CYCLE ACADEMY SCHOLARSHIP INSTRUCTOR TRAINING

APPLICANT INFO	RMATION	
Name (Mr./Mrs./Ms.):		Surname:
Gender:		Date of Birth:
Address (Home):		
Phone (Mobile):		Email:
Contact person in case of e	emergency:	Phone (Mobile):
Social Media Details	Facebook:	Instagram:
	Line ID:	SnapChat:
APPLICANT		
1. Current job/position, if any		
2. Any teaching experience?	How many years?	
If Yes, please specify what do	you teach?	
3. Are you fluent in English? `	Yes/No?	
4. How many cycling classes	have you attended?	
5. Are you willing to relocate	at some point?	
6. Have you had any mental h	nealth or addiction issu	ues? You can choose to list here or contact a member of the
		person. We take your health very seriously and we will work with you
7. Do you have any injuries? \	——————————————————————————————————————	istory? Do you have any medical conditions we should know about?
(Please provide as much deta		



## **OTHER INFORMATION**

1. Are you available for the training dates in Bangkok, Thailand?			
Why do you want to become an instructor?			
What inspires you most about instructing?			
Do you want to be a Full Time or Part Time instructor?			
Does your lifestyle allow you to teach 10 classes on average per week?			
Are you willing to do anything to make it?			
RAINING COURSE GENERAL AGREEMENTS			
understand that The Absolute Cycle Scholarship Instructor Training course will be both physically and mentally nallenging, with up to two, 45-minute Cycling Classes daily along with 5-6 hours of required class and workshop time			
take full responsibility for my own health and well-being during the course and will not hold Absolute Cycle or any case teaching staff responsible for injuries and/or other medical problems that might occur.			
commit to turning up to every training session on time and in a fit and healthy state of mind.			
understand that a positive, team-oriented, optimistic attitude is a requirement for all attendees. Disruptive, rude, c egative behavior will not be tolerated and may result in removal from the training.			
nereby acknowledge and agree to fully comply with this Application Form.			
gnature of the Applicant Date			