

Employment Application

Student Recreation, Fitness and Wellness

Lewis University



Date: _____ Availability: _____ Fall _____ Winter _____ Winter Break
 _____ Spring _____ Summer _____ Spring Break

It is optional, but preferred that you attach a current résumé to supplement this application.

Personal Data (Please type or print clearly and complete all sections in full.)

 First Name MI Last Name E-Mail Address

 Local/Campus Address

 City State Zip Phone (list all numbers)

 Permanent/Home Address

 City State Zip Phone (list all numbers)

 Year in School Major Date of Graduation Work Study Grant (Yes/No)

Have you previously worked for Lewis University as a student employee? Yes _____ No _____

If so, which department? _____ Dates of employment: from _____ to _____

Desired Position (Rank these positions in order of interest - 1 for highest priority, 2 for second highest and so on. Some positions require certifications and/or related experience.)

- ____ Building Staff (Rec Center and Field House)
- ____ Student Manager (Rec Center and Field House)
- ____ Group Fitness Instructor
- ____ Personal Trainer
- ____ Lifeguard
- ____ Weight Room Supervisor

Certifications (Check all **current** certifications you have earned. You must provide a copy of each certification.)

CPR, AED, and First Aid Certifications: Aquatics Certifications:

- CPR for the Professional Rescuer
- Adult CPR
- Standard First Aid
- Other: _____
- Other: _____
- Lifeguard Training

Group Fitness/Personal Training Certifications (please list):

Previous Work Experience (Please attach an additional sheet if necessary to include all relevant work experience.)

Position #1:

 Company Name Job Title Dates of Employment

 Contact Name and Phone Number May we contact your supervisor for a reference?

 Responsibilities Reason for seeking other employment

Position #2:

Company Name	Job Title	Dates of Employment
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Contact Name and Phone Number	May we contact your supervisor for a reference?
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Responsibilities	Reason for seeking other employment
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Please list any volunteer or leadership positions held:

What are your qualifications, strengths or special skills related to this application?

Why do you want to work for Student Recreation?

How did you hear about these Student Recreation employment opportunities?

By signing this form, I attest that the information provided on this application is given to the best of my knowledge. I understand that falsification of any information, for any reason, will result in immediate dismissal from Student Recreation, Fitness and Wellness.

Signature	Date
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Please return this application, copies of relevant certifications, and optional résumé to:
Director Student Recreation, Fitness, and Wellness • Student Recreation Center • Romeoville, IL 60446
For more information, call (815) 836-5277 or visit us on the web at <http://lewisu.edu/student-services/fitnesscenter/>

Weekly Availability for _____ Semester

Please indicate availability by marking ("X") the time slots that you are **NOT** available to work at Recreation Services

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
7:00							
7:30							
8:00							
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9:00							
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Name: _____ Local Phone #'s: _____

Local Address: _____

E-Mail: _____ Requested hrs/wk: _____ min. _____ max.

Any special requests:
