

Please list all current certifications (and expiration dates) or special skills: (CPR, AED, First Responder, First Aid, Fitness Certifications, Lifeguard Certifications, Official's Ratings, Computer Proficiency, etc.)

Please list three professional references and phone numbers.

Name: _____ Phone #: _____

Name: _____ Phone #: _____

Name: _____ Phone #: _____

Are you currently employed by another UIS department/office? YES NO

If yes, how many hours do you work per week for this department/office? _____

Do you plan to be employed by any business or organization off-campus during the academic year? YES NO

If yes, how many hours do you work per week? _____

Will you be involved with UIS varsity athletics? YES NO Are you available to work weekend hours? YES NO

If yes, which sports? _____

Are you available to work during the day? YES NO Are you available to work night hours? YES NO

Which classification of employment do you seek? Federal College Work Study Program Part-time employment

We attempt to find the best fit for our employees. Briefly explain why you feel a position with Recreational Sports would be a good fit for you and for our department:

AUTHORIZATION FOR RELEASE OF RECORDS:

In order to determine my suitability for employment, I understand that a personal background inquiry will be conducted by the Recreational Sports Office.

I, _____, do hereby authorize any educational institutions, former and present employers, and
(Print Name)

individuals to furnish the Department of Recreational Sports with any information regarding me, whether or not it is on their records. I hereby release them from civil or criminal liability for issuing same.

Signature: _____ Date: _____

Based upon a review of the information you submitted, a staff member from Recreational Sports will contact you if you are being considered for employment.

IF YOU SHOULD CHANGE YOUR TELEPHONE NUMBER OR ADDRESS, PLEASE NOTIFY OUR DEPARTMENT
AT 206-7103. THANK YOU FOR YOUR INTEREST IN RECREATIONAL SPORTS.