



Employment Application Recreation and Wellness Northern Illinois University

Date: _____ Availability: _____ Fall 2018
_____ Spring 2019

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 Northern Illinois University as a student employee? Yes _____ No _____

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

CERTIFICATIONS

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

CPR, AED, and First Aid Certifications:

- CPR for the Professional Rescuer
- Adult CPR
- Infant and Child CPR
- AED Essentials
- Community First Aid and Safety
- Standard First Aid
- Other: _____
- Other: _____

SPORTS

Sport you have played

(High School and beyond):

- Basketball
- Flag Football
- Floor Hockey
- Softball
- Volleyball
- Soccer
- Other Sports _____

Have you Officiated an organized sport:

- Yes
- No

Official Certifications:



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
Contact Name and Phone Number	May we contact your supervisor for a reference?	
Responsibilities	Reason for seeking other employment	

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 Campus Recreation as an Intramural Sports Official?

Describe your perspective of the Intramural Sports Official position.

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 Campus Recreation.

Signature

Date

Please return this application, copies of relevant certifications, and optional résumé to:
Assistant Director of Competitive Sports, Laura Kucik, Recreation and Wellness • Student Recreation Center •
DeKalb, IL 60115 For more information, call (815) 753-0516 or visit us on the web at <http://www.niu.edu/campusrec>