

Longwood University Campus Recreation

Student Employee Job Application

General Information

| | | | |
|---|---|--|---------------------|
| Last Name(Legal) | First(Legal) | MI | Longwood ID # |
| Address(provide the one you want used on employment paperwork if hired) | | City | State Zip Code |
| Main Phone () | Birth Date (needed for employment paperwork if hired): | Race(optional): | US Citizen(Y/N) |
| Check position(s) applying for: <input type="checkbox"/> Front Desk/Fitness Floor <input type="checkbox"/> Intramurals <input type="checkbox"/> Office Assistant <input type="checkbox"/> Operations Assistant <input type="checkbox"/> Group Fitness Instructor <input type="checkbox"/> Personal Training <input type="checkbox"/> Climbing Wall/Outdoor <input type="checkbox"/> Marketing Assistant <input type="checkbox"/> Program Assistant (Seniors/Graduates) | Do you have Federal work-study? Yes No Amount of award: \$ _____ | Major: _____ Year in school (Fr, So, Jr, Sr, or Grad): _____ Grad date (Month/Year): _____ GPA: _____ | |
| How did you learn of this vacancy (please list the specific employee, social media, web site, or other source)? | | | |
| E-Mail Address (Longwood email if applicable): | | | |
| Are you a current student of Longwood University? Yes No | | | |
| What Longwood clubs, organizations or services are you affiliated with: | | | |

Previous Affiliation

| |
|---|
| Are you now or have you ever been employed by Longwood University? Yes No |
| If yes, please list the location, title, department, and dates: |

Certifications: (Personal Training (ACE, ACSM), Group Fitness, CPR/AED, First Aid, etc)

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| | | | |

Availability: Cross out time blocks that you cannot work: (i.e. Classes, Jobs, Personal Commitments)

If you are applying before you get your schedule we will ask for an updated one if hired.

| | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
|-------------|--------|---------|-----------|----------|--------|----------|--------|
| 6 to 7 am | | | | | | | |
| 7 to 8 am | | | | | | | |
| 8 to 9 am | | | | | | | |
| 9 to 10 am | | | | | | | |
| 10 to 11 am | | | | | | | |
| 11 to 12 am | | | | | | | |
| 12 to 1 pm | | | | | | | |
| 1 to 2 pm | | | | | | | |
| 2 to 3 pm | | | | | | | |
| 3 to 4 pm | | | | | | | |
| 4 to 5 pm | | | | | | | |
| 5 to 6 pm | | | | | | | |
| 6 to 7 pm | | | | | | | |
| 7 to 8 pm | | | | | | | |
| 8 to 9 pm | | | | | | | |
| 9 to 10 pm | | | | | | | |

Number of Hours requested per week (Max of 20 week for Full Time students): _____

Circle the application period you would like to begin work: Spring - Summer - Fall

Date available to begin work: _____

Employment History: List current employers first, include U.S. military service.

| | | | | | | |
|---|-------------|--------------|---------------------------|------|------------|----------|
| Employer Name | | Address | | City | State | Zip Code |
| Telephone No. () | | Your Title | | | Department | |
| Beginning Date | Ending Date | Final Salary | Supervisor's Name & Title | | | |
| If you are still employed, may we contact your employer? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | |
| Summary of duties: | | | | | | |
| Reason for leaving: | | | | | | |

| | | | | | | |
|----------------------|-------------|--------------|---------------------------|------|------------|----------|
| Employer Name | | Address | | City | State | Zip Code |
| Telephone No. () | | Your Title | | | Department | |
| Beginning Date | Ending Date | Final Salary | Supervisor's Name & Title | | | |
| Summary of duties: | | | | | | |
| Reason for leaving: | | | | | | |

| | | | | | | |
|----------------------|-------------|--------------|---------------------------|------|------------|----------|
| Employer Name | | Address | | City | State | Zip Code |
| Telephone No. () | | Your Title | | | Department | |
| Beginning Date | Ending Date | Final Salary | Supervisor's Name & Title | | | |
| Summary of duties: | | | | | | |
| Reason for leaving: | | | | | | |

If you wish to describe additional work experience, attach a resume to this application.

Related Recreation Experience:

Please give any information, which may be helpful in determining your qualifications for the position.
 *(This is very important to distinguish you from other applicants)

I hereby certify that the facts set forth in this employment application are true and complete to the best of my knowledge. I understand that false statements of any kind or omission of facts called for on this application are a basis for dismissal regardless of when they are discovered. I understand that any employment offered is for an indefinite duration, unless otherwise specified in writing, and is "at-will", which means that either I (after a two weeks notice) or Campus Recreation (following Longwood policy) may terminate my employment at any time. I further understand that neither the policies, rules, regulations of employment, application for employment, nor anything said during the interview process shall be deemed to constitute the terms of any implied employment contract.

Signature of Applicant: _____ Date: _____

Please return this application to: Campusrec@longwood.edu or in person/by mail to:

**Longwood University Campus Recreation
 304 Health and Fitness Center
 201 High St.
 Farmville, VA 23909**

Longwood University is an equal opportunity employer.