



APPLICATION FOR UNBC STUDENT EMPLOYMENT

Thank you for your interest in working part time at the Northern Sport Centre.
Please return your application to the UNBC Fitness Centre.

P E R S O N A L	Last Name:	Legal First Name:	Middle Initial:	Today's Date:
	Local Address:			Local Phone: ()
	City/Province/Postal			Other Phone/Cell: ()
	Permanent Address:			Permanent Phone: ()
	City/Province/Postal			Email Address:
	Position (s) applying for: 1) Other <input type="checkbox"/> 2) Front Counter Assistant <input type="checkbox"/> 3) Facility Assistant <input type="checkbox"/>			Date available to start work:

G E N E R A L	1) Expected date for completion of studies at UNBC:	UNBC Student #:	
	2) Do you currently have any contracts with UNBC? (ie. Teachers or Residence Assistant, Student Research Assistant)	Yes <input type="checkbox"/> No <input type="checkbox"/>	How many hours do you work per week?
	3) How many hours per week can you work? <input type="checkbox"/> 5-10 hours <input type="checkbox"/> 11-15 hours <input type="checkbox"/> 16-20 hours <input type="checkbox"/> 20 + hours		No set shifts <input type="checkbox"/> on-call-basis
	4) What semester(s) are you available to work: <input type="checkbox"/> Fall (Sept-Dec) <input type="checkbox"/> Winter (Jan - Apr) <input type="checkbox"/> Spring (May-Jun) <input type="checkbox"/> Summer (Jul-Aug)		
	5) What time of day can you work? (check all the hours you are available): <input type="checkbox"/> Anytime <input type="checkbox"/> Morning: 6am-Noon <input type="checkbox"/> Afternoon: Noon - 4pm <input type="checkbox"/> Evening: 4pm - 9pm <input type="checkbox"/> Late Evening: 9pm-12am		
	6) What days of the week can you work? (check all the days you are available): <input type="checkbox"/> Any day <input type="checkbox"/> Mondays <input type="checkbox"/> Tuesdays <input type="checkbox"/> Wednesdays <input type="checkbox"/> Thursdays <input type="checkbox"/> Fridays <input type="checkbox"/> Saturdays <input type="checkbox"/> Sundays		

S K I L L S	Please list all applicable skills and certifications you may hold and expiration dates if any: ie. First Aid, CPR, Core Theory, Group Fitness, Certified Personal Training, Software courses.			
	<u>Skill/Certification</u>	<u>Organization</u>	<u>Date Obtained/Completed</u>	<u>Expires</u>
	1)			
	2)			
	3)			
4)				

R E F E R E N C E	Personal and Character References: Please list two personal/character references. Do not include people who are going to be listed as your Employment References	
	1) Name: _____ Know in what capacity (friend, relative, teacher): _____ Company or Home Address: _____ Known how long? _____ Phone #: _____ Alternate #: _____	
	2) Name: _____ Know in what capacity (friend, relative, teacher): _____ Company or Home Address: _____ Known how long? _____ Phone #: _____ Alternate #: _____	

Employment History & Work References

Please give accurate, complete full-time and part-time employment records, starting with the most recent employer.

1	Company: _____ Phone #: () _____	Employed: (Month & Year) From: _____ To: _____
	Address: _____	Reason For Leaving: _____
	Name & Title of Supervisor: _____ Phone #: () _____	
	Job Title & Brief Description of Job Duties: _____	

2	Company: _____ Phone #: () _____	Employed: (Month & Year) From: _____ To: _____
	Address: _____	Reason For Leaving: _____
	Name & Title of Supervisor: _____ Phone #: () _____	
	Job Title & Brief Description of Job Duties: _____	

3	Company: _____ Phone #: () _____	Employed: (Month & Year) From: _____ To: _____
	Address: _____	Reason For Leaving: _____
	Name & Title of Supervisor: _____ Phone #: () _____	
	Job Title & Brief Description of Job Duties: _____	

V O L U N T E E R	Volunteer History & Volunteer References	
	Organization/Contact: _____ Phone #: () _____	Volunteered: (Month & Year)
	Your Role: _____	From: _____ To: _____
	Organization/Contact: _____ Phone #: () _____	Volunteered: (Month & Year)
	Your Role: _____	From: _____ To: _____
	Organization/Contact: _____ Phone #: () _____	Volunteered: (Month & Year)
Your Role: _____	From: _____ To: _____	

This is a preliminary application for employment. Filling out this form does not constitute employment nor does it guarantee employment at the NSC. All applications will be reviewed and candidates will be contacted at a later point in regards to any future interviews or follow-up documentation. All applications will be held for up to one year (12 months) from the time of submittal. I certify that I have given true, accurate and complete information in this form to the best of my knowledge. I authorize investigation of all statements made in this application and understand that false information or documentation, or a failure to disclose relevant information may be grounds for rejection of my application or dismissal if I am employed.

Applicant's Signature

Date