



**Middle Tennessee State University**  
**Campus Recreation**  
 PO Box 556  
 Murfreesboro, TN 37132  
 Office (615) 898-2104  
 FAX (615)898-5568

## **Employment Application**

### **PERSONAL DATA**

Name (last) \_\_\_\_\_ (first) \_\_\_\_\_ (middle initial) \_\_\_\_\_

Local Address \_\_\_\_\_ Apt # \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Other Phone ( ) \_\_\_\_\_

Email Address \_\_\_\_\_@mtsu.edu Other Email \_\_\_\_\_

M Number M \_\_\_\_\_

*Person to notify in case of emergency:*

Name \_\_\_\_\_ Relationship to you \_\_\_\_\_

Address \_\_\_\_\_ Phone ( ) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Are you a recipient of MTSU Service Scholarship (work 75 hours per semester)? \_\_\_\_\_

Are you a participant of the Federal Work Study program? \_\_\_\_\_

**The Department of Campus Recreation requires specific student positions to be American Red Cross CPR, First Aid, and AED certified within 30 days of hire date.**

### **POSITION DESIRED** *(Indicate position preference - 1<sup>st</sup> choice, 2<sup>nd</sup> choice, 3<sup>rd</sup> choice)*

- \_\_\_\_\_ Office Worker (customer relations, cashier, answering phones, errands, copying, filing, etc.)
- \_\_\_\_\_ PR/Marketing (press releases, flyers, website maintenance, bulletin boards, photography, etc.)
- \_\_\_\_\_ Front Desk Worker (customer relations, equipment check-out, answer phones, computer, etc.)
- \_\_\_\_\_ Intramural Official (*circle all that you have experience w/*: basketball, volleyball, softball, football, soccer)
- \_\_\_\_\_ Outdoor Equipment Room (Checking equipment in/out, equipment maintenance, customer service, inventory)
- \_\_\_\_\_ Challenge Course/Climbing Wall (Belay certification, we will train)
- \_\_\_\_\_ Lifeguard/Water Safety Instructor (guard, teach, pool maintenance, record keeping, etc.) **(American Red Cross)**
- \_\_\_\_\_ Exercise Instructor (lead variety of group classes) **(land or water)**
- \_\_\_\_\_ Fitness Room Attendant (monitor equipment & equipment use)
- \_\_\_\_\_ Personal Fitness Trainer **(certification required)**
- \_\_\_\_\_ Sport Club Supervisor (Supervising/monitoring practices and games for approx. 20 club teams)

### **CURRENT CERTIFICATIONS** *(check all that apply)*

- |                           |                 |                               |                 |
|---------------------------|-----------------|-------------------------------|-----------------|
| _____ First Aid           | Exp. Date _____ | _____ Water Safety Instructor | Exp. Date _____ |
| _____ CPR                 | Exp. Date _____ | _____ Lifeguard Training      | Exp. Date _____ |
| _____ AED                 | Exp. Date _____ | _____ SCUBA                   | Exp. Date _____ |
| _____ Exercise Instructor | Exp. Date _____ | _____ Other _____             | Exp. Date _____ |

### **WORK EXPERIENCE** *(past two years)*

Employer \_\_\_\_\_  
 Supervisor \_\_\_\_\_  
 Phone ( ) \_\_\_\_\_  
 Job Title \_\_\_\_\_  
 Dates employed \_\_\_\_\_ to \_\_\_\_\_  
 Duties \_\_\_\_\_

Employer \_\_\_\_\_  
 Supervisor \_\_\_\_\_  
 Phone ( ) \_\_\_\_\_  
 Job Title \_\_\_\_\_  
 Dates employed \_\_\_\_\_ to \_\_\_\_\_  
 Duties \_\_\_\_\_

Have you previously been employed by MTSU?  yes  no  
 With which department? \_\_\_\_\_ Supervisor \_\_\_\_\_

Place an (x) in the spaces you are **AVAILABLE** to work.

TIME	MON	TUES	WED	THURS	FRI	SAT	SUN
6:00 am							
7:00 am							
8:00 am							
9:00 am							
10:00 am							
11:00 am							
12:00 pm							
1:00 pm							
2:00 pm							
3:00 pm							
4:00 pm							
5:00 pm							
6:00 pm							
7:00 pm							
8:00 pm							
9:00 pm							
10:00 pm							
11:00 pm							
12:00 am							

Please indicate the Semester Applying for:  Fall  Spring  Summer

Additional comments for schedule purposes only: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Can you work during breaks, between semesters, and holidays?  yes  no

Have you ever been convicted of a felony?  yes  no  
 If yes, please explain: \_\_\_\_\_  
 \_\_\_\_\_

I certify that such statements are true and understand that misrepresentation or omission of facts called for in this application may be cause for termination of employment without notice. I understand that work references may be contacted for verification of employment. I understand that evaluations of job performance will occur each semester and will affect continued employment.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

THANKS FOR YOUR INTEREST IN MTSU CAMPUS RECREATION!

A Tennessee Board of Regents University  
 MTSU is an equal opportunity, non-racially identifiable, educational institution that does not discriminate against individuals with disabilities.

**Office Use Only**

Date Application Received: \_\_\_\_\_ Copies: \_\_\_\_\_