



# Recreation Programs

## Application for Employment

### Position Desired:

Intramural Supervisor \_\_\_\_\_ Intramural Official \_\_\_\_\_  
Program Assistant \_\_\_\_\_ Office Assistant \_\_\_\_\_

<b>Interested Semester(s):</b>
Fall _____
Spring _____
Summer _____

### Applicant Information:

Student Year (Circle): Freshman      Sophomore      Junior      Senior

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Home Address: \_\_\_\_\_ Campus Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Home Phone #: \_\_\_\_\_ Campus Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

### Previous Work Experience:

Have you worked at Rider University before?      Yes \_\_\_\_\_      No \_\_\_\_\_

If "Yes", please elaborate: Where, When, and provide the name of your immediate supervisor:

\_\_\_\_\_

Are you CPR certified?      Yes \_\_\_\_\_      No \_\_\_\_\_      If "Yes", expiration date: \_\_\_\_\_

Are you First Aid certified?      Yes \_\_\_\_\_      No \_\_\_\_\_      If "Yes", expiration date: \_\_\_\_\_

**Be sure to complete all three (3) pages before you submit your application.**

*I understand that completion of this application does not guarantee employment with Recreation Programs. I have read the information provided regarding Recreation Programs' policies and procedures and, if employed, agree to abide by them.*

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

**If you have any questions, please contact Recreation Programs at 609-896-7770.**

**Please answer the following questions:**

1. List past relevant work experiences.
2. What interests you about this position?
3. What do you hope to gain from this experience?

Mark an "X" in the time slots that you are available to work for this semester.

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**Return this application to:**

Campus Activities and Recreation Programs  
 Student Recreation Center 2<sup>nd</sup> Floor  
 Rider University  
 2083 Lawrenceville Road  
 Lawrenceville, NJ 08648