



THE STUDENT RECREATION CENTER

Aerobic Instructor  Aquatics  Fitness  Intramural

Marketing/Memberships  Member Relations  Office  Wellness Center  Youth Programs

Personal Information

Name \_\_\_\_\_ I.D. Number \_\_\_\_\_

Local Address \_\_\_\_\_

Permanent Address \_\_\_\_\_

Local Phone \_\_\_\_\_ Permanent Phone \_\_\_\_\_

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

Emergency Contact

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

General Information

Univ. Classification (i.e. Freshman, Senior, Grad Student) \_\_\_\_\_

Major \_\_\_\_\_ Anticipated Graduation Date \_\_\_\_\_

Are you presently employed on campus? No \_\_\_\_\_ If Yes, (where) \_\_\_\_\_

Have you been granted College Work Study? No \_\_\_\_\_ Yes \_\_\_\_\_, Amount \$ \_\_\_\_\_

Computer Experience: None \_\_\_\_\_ Light \_\_\_\_\_ Moderate \_\_\_\_\_ Extensive \_\_\_\_\_

What certifications do you currently have?

CPR/First Aid Certified: No \_\_\_\_\_ /Expected \_\_\_\_\_ / Yes \_\_\_\_\_, Expiration \_\_\_\_\_

Aerobic/Group Fitness: No \_\_\_\_\_ /Expected \_\_\_\_\_ / Yes \_\_\_\_\_, Expiration \_\_\_\_\_

Life Guard Certified: No \_\_\_\_\_ /Expected \_\_\_\_\_ / Yes \_\_\_\_\_, Expiration \_\_\_\_\_

Fitness Training: No \_\_\_\_\_ /Expected \_\_\_\_\_ / Yes \_\_\_\_\_, Expiration \_\_\_\_\_

Qualifications & Work Experience

List customer service, leadership, and maintenance, etc., experiences you have.

\_\_\_\_\_  
\_\_\_\_\_

Name of supervisor \_\_\_\_\_ Place of Employment \_\_\_\_\_ Position \_\_\_\_\_ Dates of Employment \_\_\_\_\_

Employment References

\_\_\_\_\_  
\_\_\_\_\_

Signature

Date

Vanderbilt University is an Equal Opportunity/Affirmative Action Employer.