



THE UNIVERSITY OF TENNESSEE AT MARTIN

Office of Campus Recreation
Recreational Supervisor Application

APPLICANT CONTACT INFORMATION

Name _____

Student ID # _____

Street Address _____

City _____ State/Province _____ Zip _____

Home Phone # _____

Cell Phone # _____

Email _____

PERMANENT CONTACT INFORMATION

Street Address _____

City _____ State/Province _____ Zip _____

Home Phone # _____

Cell Phone # _____

Email _____

Are you currently employed by UT Martin? Yes or No

Have you ever been employed by UT Martin? Yes or No

If Yes, please list employment dates and name of supervisor:

Type of position _____

Place of Employment _____

Supervisor's Name _____

Phone # _____

Start Date _____

End Date _____

POSITION REQUIREMENTS:

- Candidates may apply for the position in their sophomore year, but must be classified as a junior upon their first day of work.
- Candidates must have a minimum of a 2.25 cumulative GPA
- Candidates must have a demonstrated appreciation and knowledge of various sport and recreation activities.

CURRENT EDUCATION

Classification:

- So Jr Sr
 Graduate Student

Major _____

GPA _____

Expected Graduation Date

Date of Application

UT Martin is an Equal Opportunity Institution. The University of Tennessee at Martin does not discriminate on the basis of race, gender, color, religion, national origin, age, disability or Vietnam veteran status in provision of educational opportunities or employment opportunities and benefits. UT Martin does not discriminate on the basis of gender or disability in the education programs and activities which it operates, pursuant to requirements of Title VI of the Civil Rights Act of 1964 as codified in 42 U.S.C. 2000D; Title IX of the Educational Amendments of 1972, Public Law 92-318; Section 504 of the Rehabilitation Act of 1973, Public Law 93-112; the Americans with Disabilities Act of 1990, Public Law 101-336; and the Age Discrimination in Employment Act. This policy extends to both employment by and admission to the university. Inquiries concerning Title VI, Title IX, Section 504, the Americans with Disabilities Act, and the Age Discrimination in Employment Act should be directed to the Office of Equity and Diversity, 240 Gooch Hall, UT Martin, Martin, TN 38238-5002, 731-881-7202. Charges of violation of the above policy also should be directed to the Equity and Diversity Officer. E05-0235-00-009-08

THE UNIVERSITY of
TENNESSEE **UT**
MARTIN

Have you ever worked for Campus Recreation? Yes or No

If Yes, please check all that apply:

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> Intramural Official | <input type="checkbox"/> Intramural Scorekeeper | <input type="checkbox"/> Fitness Center | <input type="checkbox"/> Lifeguard |
| <input type="checkbox"/> Maintenance/Field Crew | <input type="checkbox"/> Rec. Check | <input type="checkbox"/> Table Check | <input type="checkbox"/> Office |
| <input type="checkbox"/> Special Olympics | <input type="checkbox"/> Senior Games | <input type="checkbox"/> MTD Picnic | <input type="checkbox"/> Concerts/Speakers |
| <input type="checkbox"/> Commencement | | | |

Have you ever played, coached, or organized an Intramural Sports team at the collegiate level? Yes or No

If Yes, which sport(s) and in what capacity? _____

Have you ever participated in any other Campus Recreation programs or activities? Yes or No

If Yes, which one(s)? _____

Are you a member of any other organization or group on campus? Yes or No

If Yes, which one(s)? _____

List any leadership position(s) held in the group or organization. _____

Do you have First Aid certification? Yes or No If yes, expiration date: _____

Do you have CPR certification? Yes or No If yes, expiration date: _____

Do you have Lifeguard certification? Yes or No If yes, expiration date: _____

Any other certifications? (Please indicate the expiration dates for each one!)

Please provide your previous work experience: (If there is none: type N/A)

Type of Position _____

Place of Employment _____

Supervisor's Name _____

Phone # _____

Give a brief description of your responsibilities _____

Type of Position _____

Place of Employment _____

Supervisor's Name _____

Phone # _____

Give a brief description of your responsibilities _____

Please type a paragraph on a separate sheet of paper explaining why you would like to be a Recreational Supervisor and how you can benefit the program.

Applicant's Signature _____