

# UPWARD BOUND SUMMER INSTRUCTOR APPLICATION

## Personal Information:

|  |   |                        |          |                                       |
|--|---|------------------------|----------|---------------------------------------|
| Last Name  | First Name                                | Middle Name or Initial |          | Date of Birth                         |
| Present Address (Number, Street, Date Residence) | City                                      | State                  | Zip Code | Area Code & Phone Number<br>(       ) |
| Permanent Address (if different from above)      | City                                      | State                  | Zip Code | Area Code & Phone Number<br>(       ) |
| Email Address                                    | Best time(s) of day to reach you by phone |                        |          |                                       |
| Social Security #                                |   |                        |          |                                       |

## Education

| School or Institution               | Name and Location | No. of Years Completed | Graduated | Course of Study | Degree/Certificate |
|-------------------------------------|-------------------|------------------------|-----------|-----------------|--------------------|
| Junior College (if applicable)      |                   |                        |           |                 |                    |
| Other College or University         |                   |                        |           |                 |                    |
| Graduate School                     |                   |                        |           |                 |                    |
| Business, Trade, or Service Schools |                   |                        |           |                 |                    |

## Work Experience (paid or volunteer):

|   |  |       |   |
|---|--|-------|---|
| Name of Employer  | Title or Position                      |       |   |
| Description of duties/role:                                       |  |       |   |
| Address   | City                                   | State | Zip Code                                |
| Employment Dates (Month & Year)<br>From:                      To: | Name and Title of Immediate Supervisor |       | Area Code & Phone Number<br>(       ) - |

|   |  |       |   |
|---|--|-------|---|
| Name of Employer  | Title or Position                      |       |   |
| Description of duties/role:                                       |  |       |   |
| Address   | City                                   | State | Zip Code                                |
| Employment Dates (Month & Year)<br>From:                      To: | Name and Title of Immediate Supervisor |       | Area Code & Phone Number<br>(       ) - |

|                                 |  |                   |                          |
|---------------------------------|--|-------------------|--------------------------|
| Name of Employer                |  | Title or Position |                          |
| Description of duties/role:     |  |                   |                          |
| Address                         |  | City              | State      Zip Code      |
| Employment Dates (Month & Year) | Name and Title of Immediate Supervisor |                   | Area Code & Phone Number |
| From:              To:          |  |                   | (      )      -          |

|                                 |  |                   |                          |
|---------------------------------|--|-------------------|--------------------------|
| Name of Employer                |  | Title or Position |                          |
| Description of duties/role:     |  |                   |                          |
| Address                         |  | City              | State      Zip Code      |
| Employment Dates (Month & Year) | Name and Title of Immediate Supervisor |                   | Area Code & Phone Number |
| From:              To:          |  |                   | (      )      -          |

### Training/Certification

Check courses taken for special skills, current certification or leadership. Indicate expiration date. (Proof of certification will be required.)

|                |          |                               |                           |
|----------------|----------|-------------------------------|---------------------------|
| First Aid ____ | CPR ____ | Life Guarding Experience ____ | Teaching Certificate ____ |
| Expires:       | Expires: | Expires:                      | Expires:                  |

Are 21 or older AND possess a valid driver's license. (This is not a requirement for employment; however, some staff duties may include driving rental vehicles.) \_\_\_\_\_

If so, are you available to drive?      \_\_\_Yes      \_\_\_No      Driver's license # \_\_\_\_\_ State \_\_\_\_\_

Expiration Date:

DMV records will be obtained and reviewed for employees for whom driving is a job responsibility.

### References

List 3 people **NOT** related to you who can attest to your qualifications for the position for which you are applying. Include one of your previously listed employers. A minimum of 2 references are required in order to complete the hiring process for new staff members, and 1 reference is required for returning staff..

| Name | Profession | Area Code & Phone Number | Business or Home Address / Email |
|------|------------|--------------------------|----------------------------------|
|      |            | Bus. (      )      -     | Address:                         |
|      |            | Home (      )      -     | Email:                           |
|      |            | Bus. (      )      -     | Address:                         |
|      |            | Home (      )      -     | Email:                           |
|      |            | Bus. (      )      -     | Address:                         |
|      |            | Home (      )      -     | Email:                           |

I hereby authorize College of the Redwoods to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to College of the Redwoods any and all letters, reports and other information related to my work records, without giving prior notice of such disclosure. In addition, I hereby release College of the Redwoods, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

(Check all that apply) Present Employer

Previous Employers  
 References Listed      Signature \_\_\_\_\_  
 Date

*Please email your application, resume, cover letter, and your course proposal to  
 katy-keyser@redwoods.edu*