Bemidji State University

Gillett Wellness Center

1801 Birch Ln NE – Bemidji, MN 56601

(218) 755-4135

APPLICATION for Student Employment

Date: _____ Email: _____

Name: _____ Tech ID (if known): _____

Birthdate: _____ Cell Phone Number: _____

School Address: _____

Home Address: _____

Indicate the year and semester(s) you're applying for:

FALL _____ SPRING _____ SUMMER _____

Do you have work-study? _____

Would you be able to work during school breaks? _____

What positions are you applying for? (Circle all that apply)

Customer Service Specialist **Lifeguard** **Fitness Instructor** **Intramural Sport Official** **Indoor Climbing Wall**

Do you currently have any certifications? _____

If so, please check all that apply:

_____CPR	Expires: _____
_____First Aid	Expires: _____
_____AED	Expires: _____
_____Lifeguard	Expires: _____
_____Water Safety Instructor	Expires: _____
_____Fitness Instructor	Expires: _____
_____Personal Trainer	Expires: _____
_____Other	Expires: _____

Please submit/attach copies of your certifications with this application

Do you have any other relevant skills? (ex. graphic arts designer, social media, outdoor activities/experiences, climbing wall)

_____

Please indicate what year you are at Bemidji State University ___ 1st, ___ 2nd, ___ 3rd, ___4th, ___ Other

Planned graduation date? _____

Please list three references:

Name: _____ Job title: _____ Phone: _____
Email: _____
Relationship to: _____

Name: _____ Job title: _____ Phone: _____
Email: _____
Relationship to: _____

Name: _____ Job title: _____ Phone: _____
Email: _____
Relationship to: _____

Previous Employment (starting with most recent)

Occupation: _____ Employer: _____
Job Duties: _____

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Job Duties: _____

Occupation: _____ Employer: _____
Job Duties: _____

Do we have permission to contact your previous employers? **Yes / No**

Are you participating or going to participate in any extracurricular activities?

If so, list them here: _____

What are some of your interests and hobbies?

Why do you wish to work at the Wellness Center?

What are your relevant skills and experiences? Please list all that may apply for the position you are interested in.

Semester:		Indicate the days and times you **CANNOT** work					
Time:	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
5:45-7:00am							
7:00-8:00am							
8:00-9:00am							
9:00-10:00am							
10:00-11:00am							
11:00-12:00pm							
12:00-1:00pm							
1:00-2:00pm							
2:00-3:00pm							
3:00-4:00pm							
4:00-5:00pm							
5:00-6:00pm							
6:00-7:00pm							
7:00-8:00pm							
8:00-9:00pm							
9:00-10:00pm							
Name:		**Email:**			**Phone #**		
Please list any days you know already you will need off:							