

#### LOVELAND SPORTS DAY CAMP-Employment Application

The Loveland Sports Day Camp Promotes a Drug and Alcohol Free Workplace We are an Equal Opportunity Employer

Please download and email to <a href="mailto:loveland.com/loveland.com/loveland.com/">loveland.com/loveland.com/loveland.com/loveland.com/</a> Or print and mail to: Loveland Sports Camp: P.O. Box 2470, Loveland, CO 80539

Do not change the format o Print neatly in ink or type.	r layout of this form.		
Answer all questions compl	etely		
Complete and include all su			
Read all information/disclain			
Sign this application and all	other forms.		
If you have any questions of	or problem, please speak with head	coach	
Position Desired			
Position Applied For:		_	
Personal Data			
Name:			
Address:			
City:	State:	Zip:	
Phone: Cell:	Email:		
Are you all Scitizen?	Vac No		
Are you over age 18?	_ Yes No Yes No If no, please give a	ide.	
Have you ever worked or vo	lunteered for the Loveland Swim	Club? Yes	No If ves. dates:
Driver's License No.:	State:	Class:	_ Expiration:
Please list other names you	have used:		
Have you ever been discharg	ged, requested or forced to resig	n from any position f	or misconduct or unsatisfactory
Yes No			
If yes, please explain circum	stances:		
limited to driving while/under the racing/exhibition of speed, leaved driving offence that is a misder (civil) traffic offenses. If you are have pleaded guilty or no local	meanor, or for which the possible pe	drugs, extreme DUI, rong on a suspended, revenalty includes jail time tion, please ask for assend/or have been senter	eckless driving, aggressive driving, voked or refused license, or any other e. "Crime" does not include minor sistance. "Convicted" means that you
	icted of a crime, regardless of whitary court? Answer by writing "Y		was later set aside or expunged, in
Q: Are you presently pendin	g trial or other court proceeding	for any crime? Answ	er by writing "Yes" or "No"
trial pending), date(s) of con	r or both of these questions, plea viction(s) and jurisdiction(s) (cou ive date(s):	ırt, city, county & sta	offense(s) for which convicted (or te). If an offense(s) has been set

Your fingerprints will be sent to state and federal law enforcement agencies (DPS and FBI). All offers of employment or continued employment will be subject to satisfactory review of any criminal convictions you may have.

Your failure to make a full and accurate disclosure of any prior convictions(s), or to answer the questions above fully and accurately, however, will result in the rejections of any pending application or offer for Loveland Sports Day Camp employment, or termination of Loveland Sports Day Camp employment, as applicable.



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Indicate highest grade completed: High School: (9-12):  Did you graduate from High School or do you have a G.E.D.? Yes No High School G.P.A.:  Name of School, College, or University: Major: Credit Hours: Degree* G.P.A								
					Major:	Credit Hours:	Degree*	G.P.A
					Course of Study		Diploma:	
List License (date & #)	, professional registrations (d	ate), certificates and pro	ofessional memberships:					
List Honors, Awards, F	Fellowships:							
Skills Overview List computer software	e with which you are familiar:							
Fluent in a language o	ther than English: Speak:	Read:	Write:					
Please summarize rele	evant skills and experience tha	t exemplify your qualifi	cations for the above position:					
Summarize Communit	y Services work (paid or volur							
Summarize Leadership	o roles:							
Summarize Sport Rela	ted Qualifications:							



# LOVELAND SPORTS DAY CAMP-Employment Application SPORTS CAMP

### Employment History 1 \ Current or Most P

	Address:				
Your Title:	one: Address: rr Title:Number of workers you directly supervised:				
<b>Employment Dates</b>	s: From: To:				
Supervisor's name	ne & title:				
Starting Salary: Pro Work Performed:	resent/Ending: Hours per week:				
Reason for leaving May we contact thi	g or wanting to change: Yes				
2.) Next Recent	Employer:				
Phone:	Address:				
Your Title:	Address:Number of workers you directly supervised:				
<b>Employment Dates</b>	s: From: To:				
Supervisor' s name	ne & title: Hours per week:				
Starting Salary: Pre	resent/Ending: Hours per week:				
Work Performed:					
	g or wanting to change:				
	is employer if you are considered for the position? Yes _				
May we contact thi		No			
	ease provide 4 references.	No			
References: Plea	ease provide 4 references.	No			
References: Plea	ease provide 4 references.  Phone:	No			
References: Plea	ease provide 4 references.	No			
References: Plean Name: Relationship: Name:	Phone: Yes NoPhone: Yes NoPhone: Yes NoPhone: Phone: Phone Phone Phone Phone Phone Phone	No			
References: Plean Name: Relationship: Name:	ease provide 4 references.  Phone: May we contact? Yes No	No			
References: Plean Name: Relationship: Name: Relationship:	Phone:  May we contact? Yes No  Phone:  May we contact? Yes No  May we contact? Yes No	No			
References: Pleaname: Name: Name: Relationship: Relationship:	Phone: Yes NoPhone: Yes NoPhone: Yes NoPhone: Phone: Phone Phone Phone Phone Phone Phone	No			
References: Plean Name: Relationship: Name: Relationship: Mame: Relationship: Relationship:	Phone:  Phone:  May we contact?  Phone:  May we contact?  Phone:  May we contact?  Yes  No  Phone:  Phone:	No			



#### **LOVELAND SPORTS DAY CAMP-Employment Application**

#### **Conditions of Consideration for Employment**

All information contained on the application is subject to verification. Loveland Sports Day Camp will conduct background checks including but not limited to, work references, driving records, criminal conviction records and educational attainment.

I understand an employment offer is contingent upon successful completion of a pre-employment alcohol/drug test. Applicants testing positive for illegal drugs, unauthorized prescription drugs or alcohol will not be hired by the Loveland Sports Day Camp. I further understand that any condition which may preclude my ability to perform essential functions of the job and such conditions can not be reasonably accommodated will disqualify me from consideration for employment in the job for which I was examined. I also authorize the Loveland Sports Day Camp to conduct future examinations and work-related reviews by a physician and agree to follow any consequent prescribed work restriction, activities, and/or treatment.

I understand that employment with the Loveland Sports Day Camp is also contingent upon successful completion of a national background investigation and for relevant positions, a physical examination and polygraph examination.

I understand that specific positions at the Loveland Sports Day Camp may require me to provide evidence of an acceptable driving record.

I understand that employment at the Loveland Sports Day Camp is "at will" meaning that it may be terminated at any time by either party.

I understand all conditions of employment including but not limited to hours, benefits and salary are subject to change by the Loveland Sports Day Camp at any time.

If employed, I agree to provide proof of identity, relevant licensure or credentials, and authorization for employment in the United States.

If employed, I agree to abide by all policies, regulations and guidelines established by the Loveland Sports Day Camp.

When advised, reasonable accommodations will be made in order for an "otherwise qualified applicant" with a disability to participate in any phase of the recruitment process. (Americans with Disabilities Act of 1991).

I certify that all the information provided herein is true and complete to the best of my knowledge. I agree and understand that omissions, misstatements, and falsifications will cause forfeiture on my part of all eligibility to any employment with the Loveland Sports Day Camp and may be cause for rejection of this application, removal of my name from eligibility lists, or discharge from Loveland Sports Day Camp service. In addition, I give the Loveland Sports Day Camp the right to investigate and verify any information obtained through the application process. Permission is granted and I release from any and all liability any employer, agency or individual assisting the Loveland Sports Day Camp in providing relevant, job related information that will assist in this process.

My signature below acknowledges my understanding and agreement with the above.

Signature:	Date: