

LIFEGUARD

Please return this application to Jeff Norris at jnorris3@emich.edu

Returning Employee Application

Employment and placement will be based on employee work study and availability. Early morning, and weekend shifts are essential to the success of our operation. We appreciate flexible, positive, energetic applicants that are passionate about wellness!

Name (First, Middle, Last)	Email (please use your emich email address):			
	@emich.edu			
Local Address	Contact Number			
Street City State 2	Zip If rehired, this information should match your When to Work profile.			
Home Address	Phone Number			
Street City State 2	Zip			
Street City State 1				
Contact in case of emergency Name of person Relation to	you Phone Number			
	CERTIFICATIONS (CPR, First Aid, Lifeguard, etc.)			
STUDENT STATUS	Please attach copy of certification			
Student Number Number of credits hrs. registered Summer '21	Certification: Exp. Date			
j	2/p. 2 4 4			
Class Standing (circle) Anticipated Graduation Date	By initialing the following statements acknowledges that you have read and understand:			
Fr., Soph., Jr., Sr., Grad.	Discipline policy			
	Student Employee Handbook			
Are you presently employed by another EMU	Assigned job description			
department or will you be in Summer '21? YES or NO	REC/IM Emergency Procedure Manual			
	Signed Confidentiality Statement and Michelle has on file			
	As a REC/IM employee, will check my emich account daily			
Do you have work-study approval? If so, please add amount per semester	Will you be commuting to work more than a 15 minute drive?			
YES or NO s	VES or NO			

LIFEGUARD

Lifeguards require prior certification

Please return all Lifeguard applications to Jeff Norris

NOTE: Your availability should match your "WHEN TO WORK" availability.									
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday		
5-7									
'-7:30									
:30-8									
3-8:30									
3:30-9									
9-9:30									
9:30-10									
.0-10:30									
.0:30-11									
1-11:30									
1:30-12									
2-12:30									
2:30-1									
-1:30									
:30-2									
2-2:30									
2:30-3									
3-3:30									
3:30-4									
-4:30									
:30-5									
5-5:30									
:30-6									
5-6:30									
5:30-7									
' -7:30									
:30-8									
3-8:30									
8:30-9									
9-9:30									
9:30-10									
.0-10:30									
.0:30-11									
1:-11:30									
1:30-12									
	has received y	vour applicatio	n and employme	nt is verified a	nd accented	vou will receive	a request from		

Hours per week desired_

Accurately cross out the times when you CANNOT work on the schedule below. Please allow time to get to and from class. For example, if you have a class that ends at 11:00, don't say you can start at 11:00. Instead, cross out time blocks up to 11:30. If you have class that begins at 12:00, don't say you can work up to 12:00, and want to leave at 11:50. If you're hoping to get many hours, leave a

Name: