



# LOVELAND SPORTS DAY CAMP-Employment Application

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

**Your signed application can only be accepted in hard copy form. Please mail your completed application to:  
Loveland Sports Day Camp: P.O. Box 2470, Loveland, CO 80539 – or hand to Jim Nickell**

- Do not change the format or layout of this form.
- Print neatly in ink or type.
- Answer all questions completely.
- Complete and include all supplemental forms.
- Read all information/disclaimer on this application.
- Sign this application and all other forms.
- If you have any questions or problem, please speak with head coach

### Position Desired

Position Applied For: \_\_\_\_\_

### Personal Data

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: Home: \_\_\_\_\_ Daytime: \_\_\_\_\_ Message: \_\_\_\_\_

Are you a U.S. citizen?  Yes  No

Are you over age 18?  Yes  No If no, please give age: \_\_\_\_\_

Have you ever worked or volunteered for the Loveland Swim Club?  Yes  No If yes, dates: \_\_\_\_\_

Driver's License No.: \_\_\_\_\_ State: \_\_\_\_\_ Class: \_\_\_\_\_ Expiration: \_\_\_\_\_

Please list other names you have used: \_\_\_\_\_

**Have you ever been discharged, requested or forced to resign from any position for misconduct or unsatisfactory service?**

Yes  No

**If yes, please explain circumstances:** \_\_\_\_\_

"Crime" as used in this section means any and all felonies, misdemeanors and serious driving offenses, including but not limited to driving while/under the influence of intoxicating liquor or drugs, extreme DUI, reckless driving, aggressive driving, racing/exhibition of speed, leaving the scene of an accident, driving on a suspended, revoked or refused license, or any other driving offence that is a misdemeanor, or for which the possible penalty includes jail time. "Crime" does not include minor (civil) traffic offenses. If you are not sure how to answer this question, please ask for assistance. "Convicted" means that you have pleaded guilty or no lo contender ("no contest") to a crime and/or have been sentenced for a crime, whether incarcerated, placed on probation, fined or receiving a suspended sentence.

**Q: Have you ever been convicted of a crime, regardless of whether the conviction was later set aside or expunged, in any domestic, foreign or military court? Answer by writing "Yes" or "No":** \_\_\_\_\_

**Q: Are you presently pending trial or other court proceeding for any crime? Answer by writing "Yes" or "No"** \_\_\_\_\_

**If you answer "yes" to either or both of these questions, please give the details of offense(s) for which convicted (or trial pending), date(s) of conviction(s) and jurisdiction(s) (court, city, county & state). If an offense(s) has been set aside or expunged, please give date(s):** \_\_\_\_\_

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. **NOTE** "A criminal conviction(s) does not constitute an automatic bar to employment. Factors including, but not limited to, age at time of offense(s), and the relationship between the offenses(s) and the job(s) for which you have applied will be taken into account.

**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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## Education

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. \_\_\_\_\_

Name of Trade/Technical/Business/ or Other School(s) Attended: \_\_\_\_\_

Course of Study \_\_\_\_\_ Diploma: \_\_\_\_\_

List License (date & #), professional registrations (date), certificates and professional memberships:

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List Honors, Awards, Fellowships:

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## Skills Overview

List computer software with which you are familiar: \_\_\_\_\_

Fluent in a language other than English: Speak: \_\_\_\_\_ Read: \_\_\_\_\_ Write: \_\_\_\_\_

Please summarize relevant skills and experience that exemplify your qualifications for the above position:

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Summarize Community Services work (paid or volunteer) including dates:

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Summarize Leadership roles:

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Summarize Sport Related Qualifications:

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## Employment History

1.) Current or Most Recent Employer: \_\_\_\_\_

Phone: \_\_\_\_\_ Address: \_\_\_\_\_

Your Title: \_\_\_\_\_ Number of workers you directly supervised: \_\_\_\_\_

Employment Dates: From: \_\_\_\_\_ To: \_\_\_\_\_

Supervisor's name & title: \_\_\_\_\_

Starting Salary: Present/Ending: \_\_\_\_\_ Hours per week: \_\_\_\_\_

Work Performed:

\_\_\_\_\_

\_\_\_\_\_

Reason for leaving or wanting to change: \_\_\_\_\_

May we contact this employer if you are considered for the position? \_\_\_ Yes \_\_\_ No

2.) Next Recent Employer: \_\_\_\_\_

Phone: \_\_\_\_\_ Address: \_\_\_\_\_

Your Title: \_\_\_\_\_ Number of workers you directly supervised: \_\_\_\_\_

Employment Dates: From: \_\_\_\_\_ To: \_\_\_\_\_

Supervisor's name & title: \_\_\_\_\_

Starting Salary: Present/Ending: \_\_\_\_\_ Hours per week: \_\_\_\_\_

Work Performed:

\_\_\_\_\_

\_\_\_\_\_

Reason for leaving or wanting to change: \_\_\_\_\_

May we contact this employer if you are considered for the position? \_\_\_ Yes \_\_\_ No

**References:** Please provide 4 references.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_ May we contact? \_\_\_ Yes \_\_\_ No

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_ May we contact? \_\_\_ Yes \_\_\_ No

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_ May we contact? \_\_\_ Yes \_\_\_ No

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_ May we contact? \_\_\_ Yes \_\_\_ No



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## 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:** \_\_\_\_\_