



Summer Youth Activity Program

SYAP INSTRUCTOR EMPLOYMENT APPLICATION

PERSONAL INFORMATION

Name _____

Date of Birth: _____

Local Address _____

Permanent Address: _____

Home Phone: _____

Email Address: _____

Cell Phone: _____

T-Shirt Size: _____

GENERAL INFORMATION

Rice Work Study (Circle One)? Yes No

University: _____

Major: _____

Year of Study: FR SO JR SR GR Anticipated date of graduation: _____

Are you presently employed on campus? Yes No If yes, where? _____

Are you presently applying for other positions within SYAP? Yes No

If yes, please list position(s): _____, _____

How did you find out about this position? _____

EMERGENCY CONTACT

Name: _____ Relationship: _____ Phone: _____

Are you available to attend all trainings and all SYAP sessions?* Yes / No

*Applicants will only be considered if available for training and all eight weeks of camp

Session Dates: Training: May 29 - 31
Session I: June 3 - 14
Session II: June 17 - 28
Session III: July 8 - 19
Session IV: July 22 – August 2

No Work: July 1 - 5

If no, please explain: _____

PLEASE PROVIDE THREE REFERENCES

Name:	Relationship:
Phone Number:	Email:

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Summer Program Experience

Have you ever worked in a Summer Program or Sports Camp? Yes / No

If so, describe the program and your responsibilities.

If not, please describe other experiences that may have prepared you for this position?

What sports or activities are you qualified to teach? Describe your qualifications.

Why do you want to work as an instructor in a summer program with children ages 6-11?

Describe any past experience that you have working with youth.

Do you have any additional certifications relevant to SYAP (lifeguarding, first aid, CPR, etc)?

QUALIFICATIONS/WORK EXPERIENCE

Please attach a current copy of your resume listing all qualifications, certifications, and relevant work related experience, a cover letter, and copies of all up to date certifications.

I understand that any false or misleading information given in this application will automatically disqualify this application from the employee pool or result in termination of employment.

Signature of Applicant: _____

Date: _____