

# MSUB Recreation Activities Position Application



## Rec Activities Address

Rec Activities  
1500 University Drive  
Billings, MT 59101

## Contact

Aaron Murrish | 406 657 -2884  
aaron.murrish@msubillings.edu

## Website

msubillings.edu/recactivities

Last Name

First Name

Middle

MSUB Student ID #: - 0 \_\_\_\_\_ Year in College : Freshman | Sophomore | Junior | Senior | Graduate

Best Phone to reach you: ( ) \_\_\_\_\_ - \_\_\_\_\_ Other Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_

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

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

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

Have you been awarded work-study from the Financial Aid Office? YES NO

If yes, how much is your award? \_\_\_\_\_ (work-study award listed on financial aid letter)

## Positions applying for:

### Recreation Center:

- \_\_\_\_\_ Rec Desk Attendant
- \_\_\_\_\_ Fitness Center Attendant
- \_\_\_\_\_ Climbing Wall Monitor (climbing experience required)
- \_\_\_\_\_ Office Assistant

### Intramural Sports: (if applicable, list MOA Certification below)

- \_\_\_\_\_ Scorekeeper
- \_\_\_\_\_ Basketball Referee
- \_\_\_\_\_ Flag Football Referee
- \_\_\_\_\_ Volleyball Referee
- \_\_\_\_\_ Softball Referee
- \_\_\_\_\_ Other

### Swimming Pool:

- \_\_\_\_\_ Lifeguard (please enter certification below)
- \_\_\_\_\_ Swim Instructor

### Shifts willing to work:

Mornings (7:00am) Yes No Evenings (7:00pm till Close) Yes No Weekend (6 hour shifts) Yes No

## Certifications

### Expiration Date (if applicable)

- |  |       |
|--|-------|
| _____ Adult CPR/First Aid/AED                    | _____ |
| _____ Child CPR/AED                              | _____ |
| _____ CPR/First Aid/AED for Professional Rescuer | _____ |
| _____ Lifeguard                                  | _____ |
| _____ Lifeguard Training Instructor              | _____ |
| _____ Water Safety Instructor                    | _____ |
| _____ MOA (Sport) _____                          | _____ |
| _____ Sports Safety Training                     | _____ |
| _____ Personal Trainer                           | _____ |
| _____ Other _____                                | _____ |



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### General Employment History

Employer	Contact Name/Phone (if known)	Responsibility / Duties	Dates

Are you currently working elsewhere on MSUB campus: Yes No

If Yes, where \_\_\_\_\_ Contact Name/Phone \_\_\_\_\_

How did you here about this position? \_\_\_\_\_

Why do you want to work at Rec Activities?

Applicants Signature \_\_\_\_\_ Date \_\_\_\_\_

By typing name, you acknowledge that all information provided is accurate and truthful.

Please include a copy of your current class schedule!