Community Boating Center, Inc.

1641 Padanaram Avenue New Bedford, MA 02740

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Email:Programs@communityboating.org



For Office Use Only	
Date Received Interview Date Decision	

<u>Instructor Application and Questionnaire</u>

Please take your time to complete this application to the best of your ability. After your interview but before your hire a CORI and SORI check will be performed on all candidates for employment. CBC may conduct or hire an independent firm to conduct a background check on all candidates as well.

Name:	email:				
Current/Scho	ool Address:				
Permanent A	ddress:				
PH: (h)	(c)		(sch)		
Birth date(M	M/DD/YYYY)				
POSITION	DESIRED				
Instructor	Head Instructor	_ Adult Instructor	Desired compensa	tion rate	
Date you can	start:	Last day you	are available:		
Are you avail	able to work: Full Time	Part Time	Temporary		
Are you curre	ently employed? Yes	No			
If so, may we	e inquire of your present en	nployer? Yes N	0		
Ever applied	to Community Boating Ce	nter before? Yes	_ No If yes, who	en?	
I (my child in	a case of minor age) will be	able to work any and	all days between June 2	4, 2015-August 26, 2015 with	
the exception	of the dates listed here				
Please Initial	here in acknowle	edgement and acceptar	nce of previous stateme	ent. If you are under the age	
of 18 please h	nave your parent/guardian	initial heret	o acknowledge and acc	ept previous statement as	
<u>EDUCATION</u>	<u>N</u>				
	School Name	Years Attended	Did you Graduate?	Major	
High School					
College					
Other					

INSTRUCTION	N EXPERIENCE AN	D HISTORY		
	LING Level 1			_ Yr Cert
Years of sailing ir	nstruction experience as:	Head Instructo	or / Coach Instr	ructor / Coach
ARC First Aid	Mo/Yr	ARC or Ame	er. Heart Assoc. CPR	Mo/Yr
SPECIAL SKIL	LS AND TRAINING			
Please list any oth	ner special skills and/or	training that you	a have and feel would be	applicable:
SAILING AND	POWERBOATING I	HISTORY		
Please list the typ	es of sailboats and power	erboats with wh	ich you have experience:	
Boat Type	Sailing/Racing	Skipper/0	, , ,	Years Experience
FORMER EMF	POYERS ast three employers, star	ting with your n	nost recent one first:	
Date (from/to)	Business/Supervisor	Salary	Position	Reason for Leaving
REFERENCES	S WHOM WE MAY C	ONTACT; at 1	east one personal (a fri	end, teacher or coach)
and one employ	er, is preferred			
Name:	Ph: _		Relation:	
Name:	Ph: _		Relation:	

Name: ______ Ph: ______ Relation: _____

Questionnaire

Why do you want to be a Community l	Boating Center Sailing Instructor and what do you feel you
could bring to the program?	
-	
What are your strengths?	
NV75	
What are your weaknesses?	
	perience are you looking for, and what do you hope to gain
from this experience?	
Please feel free to use the back of this appl provide.	ication, or to add any additional information you want to
	lication are true and complete to the best of my knowledge and ments on this application shall be grounds for dismissal.
Signature:	Date:
	of filling out this application please have your parent/guardian
Parent/Guardian Signature:	Date:
i aitii, Ouaitian oignatuit.	Date