

MEDFORD BOAT CLUB SAILING INSTRUCTOR APPLICATION 2020



APPLICANT INFORMATION			
LAST NAME	FIRST NAME & MIDDLE INITIAL	SSN	DATE OF BIRTH
MAILING ADDRESS			
PHONE 1	PHONE 2 (optional)	EMAIL ADDRESS	
Are you 18 or older? Y or N		Have you been employed by Medford Boat Club previously?	
US Sailing Level 1 Certified? Y or N		If yes, in what position/capacity?	
If yes, when did you take course?		If yes, for which time period were you employed by MBC?	
If yes, where did you take course?		If yes, what was your last hourly rate?	

POSITION AVAILABLE			
What position are you applying for?			
How did you learn of the position available?			
EMPLOYMENT TYPE DESIRED	TOTAL HOURS DESIRED (weekly)	AVAILABLE START DATE	AVAILABLE END DATE
Full Time / Part Time:			

EDUCATION (INCLUDING SAILING EDUCATION)			
SCHOOL/CLUB NAME	LOCATION	YEARS ATTENDED	DEGREE/CERTIFICATE (if applicable)

SAILING/ RACING EXPERIENCE (BOAT TYPES, REGATTAS, etc.)	
---	--

APPLICABLE
SKILLS /
PROFICIENCIES

REFERENCES

NAME	COMPANY & POSITION	RELATIONSHIP	PHONE & EMAIL

EMPLOYMENT HISTORY

EMPLOYER NAME	POSITION HELD	START DATE	END DATE
MAILING ADDRESS (Town & State only)			
SUPERVISOR NAME	PHONE	EMAIL ADDRESS	
STARTING RATE OF PAY	ENDING RATE OF PAY	MAY WE CONTACT? Y or N	REASON FOR LEAVING
EMPLOYER NAME	POSITION HELD	START DATE	END DATE
MAILING ADDRESS			
SUPERVISOR NAME	PHONE	EMAIL ADDRESS	
STARTING RATE OF PAY	ENDING RATE OF PAY	MAY WE CONTACT? Y or N	REASON FOR LEAVING
EMPLOYER NAME	POSITION HELD	START DATE	END DATE
MAILING ADDRESS			
SUPERVISOR NAME	PHONE	EMAIL ADDRESS	
STARTING RATE OF PAY	ENDING RATE OF PAY	MAY WE CONTACT? Y or N	REASON FOR LEAVING
EMPLOYER NAME	POSITION HELD	START DATE	END DATE
MAILING ADDRESS			

SUPERVISOR NAME	PHONE	EMAIL ADDRESS	
STARTING RATE OF PAY	ENDING RATE OF PAY	MAY WE CONTACT? Y or N	REASON FOR LEAVING

****If you were previously employed by Medford Boat Club (if not, then please speak to your experience as a sailing instructor at another club (or other relevant employment experience)), please reflect on your experience. What were the strengths of the program, specifically? (what aspects of the job and program "worked" or were successful?) In what areas would you liked to have seen change or improvement? Explain. Please be as specific as possible.**

What personal and professional characteristics do you possess that make you a good candidate for employment in the Medford Boat Club Sailing Program? How have you demonstrated these in the past? Please be as specific as possible.

****PLEASE ATTACH ANSWERS TO THESE QUESTIONS IN A SEPARATE DOCUMENT**

PLEASE SEND COMPLETED APPLICATIONS BY **APRIL 1ST** TO:

Kerry O'Brien
kobmbcsail@gmail.com
 Any questions, feel free to contact me at:
 617-480-1254

SIGNATURE		
PRINTED NAME	SIGNATURE	DATE

