**SAIL Counselor Application**

**Summer Academy to Inspire Learning (SAIL) Program**

**Hours:**  Mandatory Training: **Saturday,** **May 18th** Hours: 9:00am – 12:00pm

**Monday, July 8th – Thursday, July 12th**

Hours: 9:00am – 5:00pm

 Two Week Program: **July 15th – 19th & July 22nd – 26th**

**Expected Hours:** **Mon – Fri 7:30am – 5:30pm**

*Optional Floater position if you have limited hours!*

**Hourly Wage:** $11.25

**Job Description**: Position will involve supervision of high school students on University of Oregon campus during the SAIL academic summer program. Responsibilities will include: safety awareness, initiating and leading student activities, supervision, campus management, monitoring attendance, engaging and talking with students about goal-setting and the benefits of higher education, facilitating initiative games during lunch and on breaks, completing tasks as assigned, keeping the Director and Office Staff informed of all concerns as well as working as a team player.

**Qualifications:** Minimum qualifications: Work well with high school students, have experience with supervision and facilitating activities, must be a team player and able to provide positive role modeling. Applicant must have the ability to follow directions and University rules, must be reliable, punctual and professional. Applicants must provide proof of enrollment in college.

**REQUIRED:** First Aid/CPR certified prior to hire.

Preferred qualifications: Experience working with teenagers, leadership skills, experience facilitating activities, flexible with transitioning schedules.

**Application**

**Instructions**: Submit: **1)** Resume **2**) SAIL Application **3)** First Aid/CPR Certification

Applications will be accepted until the position(s) are filled. Interviews and a criminal background check will be completed before hire.

**SUMMER ACADEMY TO INSPIRE LEARNING (SAIL) PROGRAM**
Division of Undergraduate Education and Student Success
5256 University of Oregon
Eugene, OR 97403-5256

**E-mail:** sailstaff@uoregon.edu | **Phone:**541-346-4668

**SAIL Counselor Application 2019**

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_SEX: \_\_\_\_\_\_\_\_\_\_\_\_DOB: \_\_\_\_\_\_\_\_

UO ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AGE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ CURRENT YEAR IN SCHOOL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

T-SHIRT SIZE (circle one): **S M L XL XXL**

COLLEGE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_INTENDED MAJOR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

HOW DID YOU HEAR ABOUT SAIL? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ETHNIC BACKGROUND: **Alaska Native American Indian Asian White/Caucasian**  **Black/ African American Hispanic/ Latino Other/ Multi-racial**

**REQUIRED AVAILABILITY:**

**Staff Training:** (May 18) & (July 8 – 12) **Week 1:** (July 15 -19) **Week 2**: (July 22- 26)

DRIVER’S LICENSE #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_STATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PERSONAL REFERENCE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMPLOYER REFERENCE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DO YOU SPEAK A SECOND LANGUAGE? IF SO WHAT?: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ANY SPECIAL ACCOMMODATIONS REQUIRED? IF SO, LIST:

1. Explain your previous experience working with high school students and/or youth?

2. Why are you interested in working for SAIL?

3. Do you have experience facilitating activities (groups, sports, games, etc.)? **Y N**

If Yes, please describe your experience:

4. Do you have your CPR and First Aid Training? **Y N** If so, when does it expire?

**Date**: \_\_\_\_\_\_\_\_\_ Attach certificate

5. Staff communicate with the Director and Office Assistant via text and calls for camp-related purposes.

Do you have access to a reliable phone during camp? **Y N**

6. Do you have **UO van certification**? If so, attach certificate and expiration date: \_\_\_\_\_\_\_\_\_\_\_

I grant the SAIL Program permission to call emergency services or take me to the hospital in the event of an emergency.

**Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Signature** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Drug and Alcohol Policy**

The use, possession of, and/or intoxication from drugs and alcohol are strictly prohibited in the SAIL Program, including at all SAIL sponsored activities. I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ understand that this is a zero-tolerance policy. I will take responsibility for my actions, be immediately be removed from the program if I defy the policy, and could face prosecution.

The information I give in this application is true and correct to the best of my knowledge. I hereby give the SAIL program permission to contact my references and submit a background check concerning my qualifications to be SAIL staff member. I also give my permission for my references to provide SAIL information about my experiences with them. If appointed as a SAIL staff member, I agree to abide by stated rules and goals for the program, and will fulfill my responsibilities to the best of my ability.

**Date**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Signature**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**OFFICE USE ONLY:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Background check cleared** | **Driver’s/Van certification****cleared** | **Reference check** | **Interview****Completed** | **First Aid/CPR Certification** | **Training completed** |
|  |  |  |  |  |  |