

## The Brendan Corporation and the Brendan Sail Training Program for Youth with Learning Differences 2010 Instructor Application

Thank you for your interest in working with the Brendan Corporation and the Brendan Sail Training Program. Please visit our website or call for a brochure if you would like additional information. The Brendan Corporation is a non-profit 501c(3) organization created to provide positive and confidence building experiences for youth 11 – 14 with moderate learning differences. The program aims to introduce youths with learning differences to the joys of sailing while helping them improve their relations with peers and build confidence and self-esteem.

The Brendan Sail Training Program is uniquely tailored to provide sail training to youth with learning differences utilizing a multi-modal instructional model. The program focuses on teaching the rudiments of small boat sailing with little emphasis on technical knowledge and no formal test taking. Goals are to provide positive, safe experiences while students learn how to sail.

The Brendan Corporation will host three programs in the summer of 2010. A day camp will be held in Annapolis, Atlanta and St. Mary's for all beginning level sailors, which may be attended by returning students, as well. A residential program for experienced sailors will be conducted on the campus of St. Mary's College of Maryland simultaneously with the day camp. Dates for all of these programs are T.B.D. The day camps run from 9AM to 4PM, with instructors expected on site by 8:30 for setup and student drop off. There is a sailing director, a lead instructor, and several additional instructors for each session. Please be sure that whether your commitment is for one or all of the sessions that you intend to be present for the entire session.

There are several prerequisites that will help you decide whether to apply for employment with the Brendan Corporation:

First, you must be a person of high moral character, and you must have an excellent background with children. We conduct criminal background checks as part of our pre-employment screening. Brendan staff pride themselves on dedication and professionalism; these are considered mandatory with every aspect of our program

Second, the love, desire, patience, and ability to work with youth with learning differences (ages 11 – 17) and your peers are the principal qualities that you must possess to be an effective instructor. You must have the patience, human understanding, and enthusiasm necessary to deal with people from all backgrounds and ability levels. You must be the type of person who can motivate others when faced with a challenge.

Third, you must be an avid sailor, willing to share your knowledge and experience with youths with learning differences. In doing so, you must always demonstrate patience, understanding and caring while maintaining a positive attitude.

If you fit the above criteria, we would like you to fill out and return the enclosed employment application (please fill out the application in its entirety . . . no shortcuts). After receiving your application we will contact you to arrange an interview.

Sincerely,

Debra Ewing  
Executive Director



**EMPLOYMENT APPLICATION**  
**The Brendan Corporation**  
**Brendan Sail Training Program for Youth with Learning Differences**  
1500 K Street, NW  
Suite 350  
Washington, DC 20005  
(202) 638-2788 (phone)    (202) 638-2780 (fax)  
[www.brendansailing.com](http://www.brendansailing.com)

Date Application received by the Brendan Corporation: \_\_\_\_\_

Applying For (check all that apply): Annapolis Program Director \_\_\_\_\_ St. Mary's Program Director \_\_\_\_\_ Atlanta Program Director \_\_\_\_\_ Lead Sailing Instructor \_\_\_\_\_ Sailing Instructor \_\_\_\_\_ Junior Instructor \_\_\_\_\_ Junior Helper \_\_\_\_\_

Please briefly tell us what you are looking for in terms of employment (e.g. position, length of employment, etc):

**Today's Date:** \_\_\_\_\_

How did you hear about our employment opportunities? (be specific) \_\_\_\_\_  
On the line below please provide any dates and reasons, which may require time off from your employment.

**Full Name:** \_\_\_\_\_ **Name You Go By:** \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ M / F (Circle one) Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Current Address:** \_\_\_\_\_ Tel. # (\_\_\_\_\_) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date that you will no longer be able to receive mail at this address: \_\_\_\_\_

**Permanent Address:** \_\_\_\_\_ Tel. # (\_\_\_\_\_) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-Mail address \_\_\_\_\_ Fax # (\_\_\_\_\_) \_\_\_\_\_  
(only give email address if you use it on a regular basis)



**EDUCATION:**

Schools Attended	Major Subjects	Dates attended	Degrees
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**PAST EMPLOYMENT / SAILING EXPERIENCE / LD EXPERIENCE or TRAINING**

(as either a student or employee. Include any work in a related field)

Employer/Program Name: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Job title: \_\_\_\_\_  
Dates of employment \_\_\_\_\_ Tel. #: \_\_\_\_\_  
Person to contact: \_\_\_\_\_

Employer/Program Name \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Job title: \_\_\_\_\_  
Dates of employment \_\_\_\_\_ Tel. #: \_\_\_\_\_  
Person to contact: \_\_\_\_\_

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City: \_\_\_\_\_ State: \_\_\_\_\_ Job title: \_\_\_\_\_  
Dates of employment \_\_\_\_\_ Tel. #: \_\_\_\_\_  
Person to contact: \_\_\_\_\_

Employer/Program Name \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Job title: \_\_\_\_\_  
Dates of employment \_\_\_\_\_ Tel. #: \_\_\_\_\_  
Person to contact: \_\_\_\_\_

**REFERENCES:** Please list at least three people who can vouch for your skills, character, or background. (Do not use friends or relatives). Employers/Teachers make the best references. Please include their Name/Relation and a means to contact them.

Name	Relationship	Phone Number of Contact
_____	_____	_____
_____	_____	_____
_____	_____	_____



**ACTIVITIES/SKILLS INVENTORY:** In the lists below, place an **X** in the appropriate category.

An **X** under the “**ONE**” column indicates you have no previous experience.

An **X** under the “**TWO**” column indicates that you have some experience.

An **X** under the “**THREE**” column indicates you have intermediate experience.

An **X** under the “**FOUR**” column indicates that you have advanced experience.

PLEASE do not leave any spaces blank under the “**EXPERIENCE**” column! **For all skill levels marked FOUR please include description of training received and experience teaching.** Use a separate sheet of paper. Also include any additional skills/ideas you feel are appropriate.

	<u>EXPERIENCE</u>				<u>TEACHING EXPERIENCE</u>			
	<u>ONE</u>	<u>TWO</u>	<u>THREE</u>	<u>FOUR</u>	<u>ONE</u>	<u>TWO</u>	<u>THREE</u>	<u>FOUR</u>
Experience working w/children	( )	( )	( )	( )	( )	( )	( )	( )
Experience working w/ LD	( )	( )	( )	( )	( )	( )	( )	( )
Conflict Resolution/Counseling	( )	( )	( )	( )	( )	( )	( )	( )
Team-building games	( )	( )	( )	( )	( )	( )	( )	( )
Sailing	( )	( )	( )	( )	( )	( )	( )	( )
Swimming	( )	( )	( )	( )	( )	( )	( )	( )
Environmental Education	( )	( )	( )	( )	( )	( )	( )	( )
Navigation/chart skills	( )	( )	( )	( )	( )	( )	( )	( )
Birds	( )	( )	( )	( )	( )	( )	( )	( )
Aquatic Life	( )	( )	( )	( )	( )	( )	( )	( )
Horticulture	( )	( )	( )	( )	( )	( )	( )	( )
Astronomy	( )	( )	( )	( )	( )	( )	( )	( )
Boat Maintenance	( )	( )	( )	( )	( )	( )	( )	( )

**CURRENT CERTIFICATIONS:** (List expiration dates below)

\*US SAILING (which certification): \_\_\_\_\_ \*Adult CPR \_\_\_\_\_

\*American Red Cross First Aid \_\_\_\_\_ W.S.I \_\_\_\_\_

E.M.T. \_\_\_\_\_ Life Guard \_\_\_\_\_

**\*Indicates Minimum Requirement of all employees except Junior Instructors and Junior Helpers.**

ON A SEPARATE PAGE PLEASE PROVIDE SHORT ANSWERS TO THE FOLLOWING:

1. Why do you want to work for the Brendan Sail Training Program?
2. What experiences have you had working with children between the ages of 11 and 17 with learning differences? Be specific: describe length of assignments and situations - describe your specific responsibilities. Most importantly what did you learn?



3. What personality trait do you possess that you think would be important to have as a member of our staff? How do you believe this will contribute to a participant's sail training experience?

**MISCELLANEOUS:**

Is there any reason, medical or other, you would be unable to complete a contract of the dates you provided on the first page of this application including participation in the activities listed on the skills inventory? \_\_\_\_\_  
(if Yes, please explain) \_\_\_\_\_

Have you ever been charged with or convicted of a crime other than a traffic violation? \_\_\_\_\_  
(If yes, please explain) \_\_\_\_\_

Do you use tobacco products (if yes, please explain) \_\_\_\_\_

*I certify that the answers given above are true to the best of my knowledge. I hereby authorize courts, police departments, motor vehicle departments, and other agencies to release any record that may be on file in my name. Any such record will become part of my personal application for employment with the Brendan Sail Training Program.*

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

Print name \_\_\_\_\_

Please send application to:

The Brendan Corporation  
C/O Debra Ewing  
600 Olney-Sandy Spring Road  
Sandy Spring, MD 20860  
301.717.4816

or fax to: 202.638.2780