

Fall Spring Summer

Year: _____



APPLICATION FOR STUDENT EMPLOYMENT

Name _____ Curriculum _____

Social Security No. _____ Student ID No. _____

Address _____ Telephone No. _____

_____ E-Mail: _____

Position applying for: (optional) _____

AVAILABILITY:

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
A.M.							
P.M.							

Number of hours per week you desire to work: _____ Date available to start work: _____

KNOWLEDGE, SKILLS and ABILITIES:

COMPUTING:

- Format Disks
- Use Excel
- Use Access
- Use MS-DOS Commands
- Use PC
- Database Programming
- Spreadsheet Programming
- Install Hardware
- Install Software
- Data Entry
- Troubleshoot
- Web Design
- PeopleSoft
- PowerPoint
- Use Publisher
- Use FrontPage
- Use Word
- Graphics/photo programs
- Use e-mail
- Use Database Software

LIBRARY:

- Library Work Experience
- Circulation Services
- Archiving
- Library Searches
- Cataloging

MISCELLANEOUS:

- Provide Customer Service
- Teaching/Training/Tutoring
- Work with the Public
- Maintain Inventory
- Keep Records/Logs
- Work with children
- Fluency in second language
- Landscape
- Heavy Lifting
- Nursing
- Vet Tech
- Biology
- Chemistry

OFFICE SUPPORT:

- Data Verification
- Use Calculator
- Operate Copier
- Cash Register
- Reception/Registration
- Filing
- Telephone/Switchboard
- Accounting/Bookkeeping
- Office Procedures
- Use Scanner
- Typing Speed: _____

MEDIA:

- 35mm Cameras
- Operate Audio Equipment
- Operate Video Equipment
- Operate Projector
- Write Copy
- Proofreading

LIST ANY OTHER SKILLS: _____

WORK EXPERIENCE:

List employment positions you have held.

Job Title _____ Employer _____

Dates Employed _____

Duties _____

Job Title _____ Employer _____

Dates Employed _____

Duties _____

Job Title _____ Employer _____

Dates Employed _____

Duties _____

EXTRA-CURRICULAR ACTIVITIES:

Community Service Experience _____

Clubs, groups or other activities with which you have been involved _____

Use this space for any additional information you think would help us evaluate your application (unique accomplishments, skills, or activities):

REFERENCES:

List three persons not related to you who know your qualifications:

Name	Address	Phone	Relationship

I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT TO THE BEST OF MY KNOWLEDGE. I AM ALSO AWARE THAT I MUST BE ENROLLED AT LEAST ON A HALF-TIME BASIS.

Signature _____ Date _____

OFFICE USE ONLY

Need _____ GPA _____

Number of Credits: Fall ____ Spring ____ Summer ____

Eligible Not Eligible Award Amount _____ Hours ____/week at \$____/hour

On-campus

Off-campus