



Work Study Application

Please provide the following information to be considered for a work study position. Students must meet all financial aid eligibility requirements. The number of applications usually exceeds the number of positions available; therefore, not everyone will be placed. This application will remain on file for the remainder of the academic year.

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: (____) _____ E-mail Address: _____
Alt. Social Security
phone (____) _____ No. _____

Campus location _____
Applied for _____ **Person** _____ **Caswell**
Terms Available for _____ **Fall** _____ **Spring** _____ **Summer**
work _____ **Mon.** _____ **Tues.**
Days and Times _____ **Wed.** _____ **Thurs.** _____ **Fri.**
Available for work

Program of Study _____

Check positions you may be interested in:

- | | |
|--------------------------------------|---|
| <input type="checkbox"/> Clerical | <input type="checkbox"/> Business Office |
| <input type="checkbox"/> Tutoring | <input type="checkbox"/> Learning Resource Center |
| <input type="checkbox"/> Maintenance | <input type="checkbox"/> Computer Lab |
| <input type="checkbox"/> Day Care | <input type="checkbox"/> Assistant to Faculty Member(s) |
| <input type="checkbox"/> Bookstore | <input type="checkbox"/> Assistant to Staff Member(s) |

Previous Employment

Company: _____

Address: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____

Company: _____

Address: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____

Application continues on back page.

Previous Employment (Continued)

Company: _____

Address: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____

Skills and Experience

____ Personal Computer

____ Microsoft Office

____ Microsoft Word

____ Microsoft Excel

____ Microsoft Access

____ Microsoft Power Point

____ Typing (wpm ____)

____ Filing

____ Faxing

____ Customer Service/Retail Experience

____ Cash Handling Experience

____ Audio/Visual Equipment Experience

Please list any knowledge of other software packages, or any other skills and qualifications you may have.

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____

Financial Aid Use Only

EFC _____

Remaining Need _____

FWS Awarded _____

FWS Location _____

Comments

