

AQUINAS COLLEGE

ON-CAMPUS STUDENT EMPLOYMENT APPLICATION

ACADEMIC YEAR 20____ TO 20____

or

Summer _____

(please print)

Name _____
Last First Middle

E-mail: _____

Local Address: _____
Street City Zip Home and/or Cell Phone

(If Applicable) _____
Residence Hall Room Number/Extension

Home Address: _____
Address City State Zip Phone

Date of Birth: _____ Social Security Number (last four digits) XXX-XX-_____

How many credit hours are you currently enrolled in at Aquinas College? _____

What's your current class status? Freshman Sophomore Junior Senior Super-Senior

What is your major? _____ Are you receiving financial aid? _____

Do you have a car on campus? _____

Are you a student athlete? _____ If so, for which sport(s) _____

Please check the following skills that you possess:

Typing ___ WPM ___ Microsoft Word ___ Excel ___ Web Design _____

Access or other Database _____ Multi-line phone _____ Copier/Fax _____

Other technical or creative skills _____

Do you have any health problems that would prevent you from working outdoors? _____

Do you have any health problems that would prevent you from lifting? _____

* Answers to these questions will not disqualify candidates who can perform the essential functions of the position either with or without a reasonable accommodation.

What is your job preference? _____

What hours are you available to work?

Monday: _____

Tuesday: _____

Wednesday: _____

Thursday: _____

Friday: _____

Saturday: _____

Sunday: _____

Previous work or volunteer experience - please describe responsibilities and where/when they took place:

1. _____

2. _____

3. _____

Student Signature

Date