TECHNOLOGY SUPPORT EMPLOYMENT APPLICATION

Personal Information ━━━━━━━━━━━━━━━━━━━━━━━━━━━━━━━━

Date: _____

Are you eligible for work study?_____

Name _____ E-mail _____

Present Address _____

Permanent Address _____

Mobile Phone_____ Other Phone _____

Referred by _____ Phone _____

General Information ━━━━━━━━━━━━━━━━━━━━━━━━━━━━━━━━

Major _____ Expected Grad Date _____

When can you start? _____

Do you have any restrictions on hours you can work? i.e. mornings and evenings.

References (3) ━━━━━━━━━━━━━━━━━━━━━━━━━━━━━━━━

Name	Address	Phone

Authorization ━━━━━━━━━━━━━━━━━━━━━━━━━━━━━━━━

I understand that misrepresentation of information requested is cause for dismissal.

Signature: _____ Date: _____

Please Attach: • A Copy of Your <u>Class Schedule</u>,
• <u>Times You Can Work</u>
• A <u>Resume</u>