



Application for Employment Library Student Assistant

Library

Date: _____

Name: _____

Stritch ID #: _____

Telephone: (_____) _____

Email Address: _____

Permanent Address: _____

City: _____ St.: _____ Zip: _____

| | |
|------------------------------|-----------------------------|
| Are you a campus resident? | |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Student Type: Undergraduate Graduate Doctoral Expected Graduation: _____

How many credits are you taking this semester? _____

Are you eligible for federal work study? Yes No

Are you available to work weekends? Yes No

Previous employment, beginning with the most recent:

| | | FROM | | TO | | | |
|---------------|------------------|------|----|----|----|---------------------|-----------------|
| Employer Name | Employer Address | MM | YY | MM | YY | Description Of Work | Supervisor Name |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

Are there any other job related experiences, skills, or qualifications which will be of special benefit in the job for which you are applying?

Attach a copy of your class schedule and list any obligations that would make you unavailable to work (e.g. athletics, clubs).

Please list two references (non-relatives).

Name: _____

Address: _____

Telephone: (_____) _____ Relation to applicant _____

Name: _____

Address: _____

Telephone: (_____) _____ Relation to applicant _____

Submitting Your Application

Via Email

1. Save the completed form to your computer
2. Attach to an email and send to rmc Carroll@stitch.edu

OR

Via Print

1. Print the completed form
2. Drop off at library circulation desk c/o Rachel Carroll

LIBRARY STAFF USE ONLY

Date application was received: _____

Date scheduled for interview: _____

Was class schedule submitted with application? Yes No

Is the student a work study student? Yes No