

Library Student Assistant Application

John Davis Williams Library

For Staff Use Only	
1 st Day of Work	_____
Pay Rate per Hour	_____
Student Number	_____
Department	_____
Phone Number	_____

Requesting work for (please circle all that apply): **Fall** **Spring** **Summer**

First day you can work? _____

Name: _____
 Last First MI

Date _____

Mailing Address:

Campus: _____

Phone: _____

Home: _____

Phone: _____

E-mail address: _____

College Classification:

Freshman _____ Sophomore _____ Junior _____ Senior _____ Graduate _____

Major Field(s) of Study _____

Minor: _____

Date of Expected Graduation: _____

GPA: _____

Are you currently employed at the University (circle one)? **YES** **NO**

If yes, how many hours do you work? _____

Are you eligible for the Federal Work-Study Program? _____

Work Experience, include present employment, if any, and most recent:

Employer:	Address:	Position:	Dates:
_____	_____	_____	_____
_____	_____	_____	_____

Local Reference, if any:

Name	Address	Phone
_____	_____	_____

Shift Preference: Mornings ____ Afternoons _____ Late Nights (until 2 a.m.) _____ Weekends _____

Number of hours you are interested in working (minimum 10, maximum 20): _____

Class Schedule for this Semester:

