

Student Employment Application Form

Name:							
Preferr	ed pronouns:						
Address:							
E-Mail	:		Phone:				
When	are you available to	o start?					
Work	Study Eligibility	Voc	No Don't know				
WOIK	Study Eligibility.	ies	NO	DOIL KHOW			
		Whe	n are you availab	ole to work?			
Veekdays Openings		ıs	Closings	ings Weekends			
Please write down all the times you are available to work for each day:							
Sun	Mon	Tue	Wed	Thurs	Friday	Sat	
Have yo	u ever worked in	a library? If s	so please describ	e your experience	, or any other re	levant skills.	

Provide names & phone numbers of two references:

Cut and paste resume here and then print out document. Alternately, submit application							
with attached resume							
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