

# APPLICATION FOR STUDENT EMPLOYMENT



Name: Last First MI N  
NSU ID#

Address: Street City State Zip

Phone number to contact you: Email:

Classification:

Have you been awarded a federal work-study grant?

Semesters you want employment:

Fill in the time(s) you are available to work this semester:

AM

PM

Monday

Tuesday

Wednesday

Thursday

Friday

Have you held a work-study or institutional position at NSU previously?

If yes, please fill in the following information:

Supervisor's Name Department Position

1)

2)

Please list any volunteer experiences:

Please list any clubs, activities or hobbies:

Have you been convicted of a crime in the last ten years?

References: (other than work-study supervisors listed above)

Name Telephone Relationship

1)

2)

In case of an emergency who should we notify?

Name: Telephone:

Please select the skills the best describe your interests:

Typing	Tutoring	Food Service
Ten Key/Adding Machine	Physical Work	Maintenance
Cash Register	Computer Skills	Other
Library Skills	Grounds Work	

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Note: \*Please return this application to the Department where you are applying.**