Today's Date: _____

Memorial Library
SUNY College at Cortland

STUDENT ASSISTANTS
Application for Work

Name: _____

    Last,   First

Social Security #: _____

(collected at time of hire)

Cortland C#: _____

Local Address: _____

_____

E-Mail Address: _____

Home (Parents) Address: _____

Local Phone #: _____

_____

Home Phone #: _____

Do you currently attend SUNY Cortland?   ☐ Yes ☐ No

– If No, where are you attending? _____

Year in college: ☐ Freshman   ☐ Sophomore ☐ Junior ☐ Senior   ☐ Graduate

Ethnicity (Optional): ☐ White/Caucasian ☐ Hispanic ☐ African American ☐ Asian ☐ Native American

☐ Other (Please specify): _____

Previous Work Experience: _____

Skills: (i.e. library, computer apps, windows or Mac user, e-learning, e-mail, etc.): _____

_____

Previous Experience at Cortland College: _____

College Information: Major: _____   Minor: _____

    Will you be student teaching this semester? ☐ Yes ☐ No   If Later, when? _____

    Are you eligible for Financial Aid's work-study program? ☐ Yes   ☐ No

    List any extra-curricular activities/another job that might conflict with work schedule:

    _____

    _____

Number of hours per week you can or want to work: _____

Prefers working: (check all that apply)
☐ with the public ☐ by myself ☐ no preference ☐ weekends ☐ early mornings ☐ evenings ☐ late nights

PLEASE INDICATE HOURS YOU CAN WORK

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	OFFICE USE ONLY
							☐ Work Study
							☐ Temp. Service
							_____ Allotted Hours
							Dept. Assigned:
							_____
							Supervisor: _____