**APPLICATION FOR CDC STUDENT EMPLOYMENT**

|  |  |  |
| --- | --- | --- |
| **What date can you begin work?** |  |  |
| **Are you eligible for Work Study?** | **Yes No** |  |

**BASIC INFORMATION**

|  |  |  |
| --- | --- | --- |
| First Name: | Middle: | Last Name: |
| University ID: | Phone: |
| Email: | Cell Phone: |

**Local Address**

|  |
| --- |
| Street: |
| City: | State: | Zip: |

**Academic Information**

|  |
| --- |
| Major: |
| Classification (Freshman, Sophomore, Junior, Senior): |

**The CDC is open 7:30am to 6:00pm. Thinking about your schedule, when are you available to work a job? (Consider transportation and walking times from class or home to the CDC)**

|  |  |
| --- | --- |
| Mondays |  |
| Tuesdays |  |
| Wednesdays |  |
| Thursdays |  |
| Fridays |  |

**Are you available between semesters? YES NO**

**WORK EXPERIENCE WITH CHILDREN AND FAMILIES:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Date Began** | **Date Ending** | **Job Title/Place of Employment** | **Duties** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Do you have any skills or qualifications that you would like to list?**

|  |
| --- |
| For example: Fluently speak French, CPR certified, etc…. |

**Please identify mode of transportation:**

**Personal Vehicle Bobcat Bus Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PLEASE RETURN THIS APPLICATION TO THE CDC FRONT DESK.**