



APPLICATION FOR PART-TIME STUDENT EMPLOYMENT Carlson Library - The University of Toledo

******PLEASE PRINT******

Applications are kept on file for the entire current semester.
A library supervisor will contact you if interested in hiring you.
You do not need to check on the status of your application

Today's Date _____ Fr___ Soph___ Jr___ Sr___ Grad___

Name _____
(Last) (First)

Rocket # _____

Phone Number _____ E-mail Address _____

Address _____

Major _____ Currently enrolled for _____ credit hours

Are you now/ have you ever worked elsewhere on campus? _____ Yes _____ No

Are you approved for the Federally Funded Work-Study Program? _____ Yes _____ No

(This is a federally funded program which you must apply for and receive approval for through Financial Aid)

Indicate below the days and times that you are available to work:

Your application will not be considered unless you have listed the times you are available to work.

Fall Semester

Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
Saturday	
Sunday	

Additional Comments: _____

Turn in this completed form at the Circulation Desk.