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 enrolled for Summer Session I, II or III? _____ Yes _____No

Have you ever been convicted of a crime? _____ Yes _____No

If yes, please explain _____

_____

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)

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

Indicate below the days and times that you are available to work:
Your application will not be considered unless you have listed the times that you are available to work.

Summer I	*Times Available*	**Summer II**	*Times Available*	**Summer III**	*Times Available*
Mon.	_____	Mon.	_____	Mon.	_____
Tues.	_____	Tues.	_____	Tues.	_____
Wed.	_____	Wed.	_____	Wed.	_____
Thur.	_____	Thur.	_____	Thur.	_____
Fri.	_____	Fri.	_____	Fri.	_____
Sat.	_____	Sat.	_____	Sat.	_____
Sun.	_____	Sun.	_____	Sun.	_____

Additional Comments: _____

_____

Turn in this completed form at the Circulation Desk.