

## **Articulation & Evaluation Student Employee Application**

Please indicate for which semester you are applying	g: Fall Spring Summer					
Name:	Today's Date:					
Local Address:						
Home/Permanent Address:						
Local Phone:	Email Address:					
SIU ID Number:	Date of Birth:					
Do you work anywhere else on campus? If yes, where?						
Are you eligible for College Work Study?	yes, amount available: \$					
CLASS STANDING: FR SO JR SR	Major:					
How many hours are you enrolled? Antic	ipated Date of Graduation:					
How many hours per week would you like to work?	Minimum Maximum					
Academic Standing: Good Standing GPA	·					
Can you type? Approx. WPM?						
What skills can you provide to our office?						
INTERESTS & SKILLS: Computer skills:	☐ Banner ☐ Other					

## PREVIOUS WORK EXPERIENCE

Employer P	osition	Duties	Supervisor	Phone Number
FERENCES (List to	vo references)			
lame	Occupation	n Rel	ationship	Phone Number
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