

## **Student Employee Application**

University Library • University of Wisconsin-Stevens Point

## Student Information Name UWSP ID#

Local Address	City/State/Zip					
Phone			Email			
Emergency Contact/Relationsh	Emergency Contact Phone					
Year in College:						
[ ] 1 (First-Year Student)	[ ] 2 (Sophomore)	[]3	(Junior)	[ ] 4+ (Se	nior)	[ ] Graduate Student
Expected Graduation Date:			What is your ma	ajor?		
Do you have work-study?	[ ] Yes - Amount: \$		What semester would you like to start working?			
	[ ] No		[ ] Fall	[ ] Spr	ring	[ ] Summer
Do you have another work-stud	y job? [ ] Yes		Are you willing	to work on weekends	? [ ] Yes	[ ] No
	[ ] No					
If yes, where?			During breaks (	(e.g. Winterim)?	[ ] Yes	[ ] No
Are you applying for a specific a	area in the library (please list)?					
Previous Work Experience						
Employer Name			Dates E	Employed		
Reference Name			Referer	nce Phone		
Job Duties						
Employer Name			Dates E	Employed		
Reference Name			Referer	nce Phone		
Job Duties						
Employer Name			Dates F	-mployed		
Reference Name				nce Phone		
Job Duties			Neicrei	nice i none		
Student Comments						

Name	UWSP ID#	

**AVAILABILITY** 

Please select all the times you will **not** be available to work at the library i.e. class, other jobs, clubs, practices.

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
7:30 AM 8:00 AM							
8:00 AM 9:00 AM							
9:00 AM 10:00 AM							
10:00 AM 11:00 AM							:
11:00 AM NOON							
NOON 1:00 PM							
1:00 PM 2:00 PM							
2:00 PM 3:00 PM							
3:00 PM 4:00 PM							
4:00 PM 5:00 PM							
5:00 PM 6:00 PM							
6:00 PM 7:00 PM							
7:00 PM 8:00 PM							
8:00 PM 9:00 PM							
9:00 PM 10:00 PM							
10:00 PM 11:00 PM							
11:00 PM MIDNIGHT							
MIDNIGHT 1:00 AM							