

PART 2

PRESENT AND PREVIOUS EMPLOYMENT –Start with Present or Most Recent Position				
EMPLOYMENT HISTORY	DATE (Month/ Year)		NAME AND ADDRESS OF EMPLOYER	POSITION
	From	To		
	Have you worked under another name? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, give name(s).		May inquiry be made of your present employer? <input type="checkbox"/> YES <input type="checkbox"/> NO May inquiry be made of your former employers? <input type="checkbox"/> YES <input type="checkbox"/> NO Do you have a legal right to work In the United States? <input type="checkbox"/> YES <input type="checkbox"/> NO	

9. Please provide additional information relative to skills or work experience that might enhance your qualifications:

10. List the hours you are available to work.

Monday: _____

Tuesday: _____

Wednesday: _____

Thursday: _____

Friday: _____

11. Typing speed: _____

12. List computer skills:

AGENCY REVIEW OF STUDENT STATUS							
1. Department	Requestor	2. Department	Requestor	3. Department	Requestor	4. Department	Requestor
Date Reviewed	HR Initials	Date Reviewed	HR Initials	Date Reviewed	HR Initials	Date Reviewed	HR Initials
5. Department	Requestor	6. Department	Requestor	7. Department	Requestor	8. Department	Requestor
Date Reviewed	HR Initials	Date Reviewed	HR Initials	Date Reviewed	HR Initials	Date Reviewed	HR Initials