

FEDERAL WORK-STUDY PLACEMENT APPLICATION

JOB I.D. #: _____

OFFICE USE: RAP: _____
HRS ENROLLED: _____
AWARD: \$ _____

STUDENT INFORMATION

NAME SOCIAL SECURITY NUMBER

CURRENT ADDRESS CITY/ STATE ZIP CODE
() - _____
TELEPHONE NUMBER ALTERNATE TELEPHONE NUMBER

QUALIFICATIONS

Typing () WPM Auto Mechanics Art
 Ten Key(touch) (sight) Custodial Ceramics
 Filing Public Safety Jewelry Repair
 Copy Machine Lifeguard Drawing
 Accounting Grounds Maintenance
 Bookkeeping Warehouse Delivery
 Office Management Child Development (ages) -
 Data Entry Child Recreation (ages) -
 Data Search Counseling
 Personal Computers (type) _____
 PC Software Package (brand) _____
 Athletics (name sports) _____
 Tutoring (expertise) _____
 Library Sciences: Circulation Periodicals Audio Visual Other
 Other Skills: _____

EXPERIENCE

Employer _____ Job Title _____
Starting Date _____ Ending Date _____
Reason for Leaving _____
Describe Work Performed _____

Employer _____ Job Title _____
Starting Date _____ Ending Date _____
Reason for Leaving _____
Describe Work Performed _____

In consideration of FWS employment sought, I certify that all information given on this application is True and Correct. I authorize my previous employer to furnish information requested about my employment.

STUDENT SIGNATURE DATE