

ACADEMIC SUPPORT EMPLOYMENT APPLICATION

NAME			
EMPLID			
PHONE			
EMAIL			
STANDING	SOPHOMORE	SOPHOMORE JUNIOR SENIOR GRADUATE	
COLLEGE STATUS FULL-TIME AT LEAST 6 CREDITS ON PROBATION		LEAST CORERITO LON PROPATION	
COLLEGE STA	FULL-TIME ATT	FULL-TIME AT LEAST 6 CREDITS ON PROBATION	
MAJOR, MINOR	8		
CUMULATIVE GPA			
WHAT BC PROGRAM(S) ARE YOU A PARTICIPANT?			
ARE YOU FUG	IBLE FOR WORK STUDY?	YES NO	
ARE 100 LEIO	BEET ON WORK OTOBT:	120 140	
DO YOU HAVE A WORK STUDY ASSIGNMENT?		YES NO	
INDICATE COURSE(S) YOU ARE APPLYING TO PROVIDE ACADEMIC SUPPORT.			
INDICATE WEEKL			
MONDAYS	TUESE		
+			
WEDNESDAYS FRIDAYS	Thurs	RSDAYS	

ATTACH THE FOLLOWING SUPPORTING DOCUMENTS TO THIS APPLICATION:

- 1. Availability: Course Schedule for the semester you are seeking employment
- 2. Academic Rigor: Copy of unofficial transcript.
- 3. **References**: Two references required. Proivide as contact information or a letter of recommendations