

ANGELO STATE UNIVERSITY
Residence Life Student Desk Assistant Application

* (red) indicates required field.

*Name: _____ *SSN/CID _____
 First MI. Last

How may we contact you regarding your application?

*Phone: _____ Cell phone (optional) : _____

*Address: _____ *City: _____

*State: _____ *Zip _____ Email: _____

***AVAILABILITY:** Please indicate hours you *anticipate* being available to work. (Pending class schedule each semester / summer.)

	SUN.	MON.	TUE.	WED.	THUR.	FRI.	SAT.
11:00am							
12:00 noon							
1:00pm							
5:00pm							
6:00pm							
7:00pm							
8:00pm							
9:00pm							
10:00pm							
11:00pm							
12:00am							
1:00am							
2:00am							
3:00am							
4:00am							
5:00am							
6:00am							
7:00am							
8:00am							

***EMPLOYMENT HISTORY:** Begin with most recent / current. Previous experience not required.

***May we contact current/past employers?** Y N

Employer:	Position:	Duties & Responsibilities:
Supervisor:		
Address/phone #:	Dates of Employment:	
Employer:	Position:	Duties & Responsibilities:
Supervisor:		
Address/phone #:	Dates of Employment:	
Employer:	Position:	Duties & Responsibilities:
Supervisor:		
Address/phone #:	Dates of Employment:	

***EXPERIENCE / QUALIFICATIONS:** Please describe for us your experience and/or qualifications for this position. (Technical skills, previous similar employment, accomplishments, personal characteristics, etc.)

- I certify that the information I have provided is true and accurate and I give my permission to verify it. (check box before they are allowed to submit application?)
- Check to verify all required fields are completed before application can be submitted?

Submit Application. (button)