



Library / Learning Resource Centers
STUDENT EMPLOYMENT APPLICATION

Date _____

Applying for a position in which Department: _____

Name _____ Student ID _____

Address _____
Street City Zip Code

E-mail Address _____

Phone _____ Cell Phone _____ Major _____

How many additional semesters do you expect to be enrolled at CCSF? _____

English course taken most recently (or currently enrolled in)? _____

Special Skills (i.e. Computer, Language, Photography, Typing, etc.): _____

Previous Work/Volunteer Experience, including for CCSF: _____

Have you applied for financial aid? _____

If so, what is your Federal Work – Study Program Award for Fall \$_____ Spring \$_____ Summer \$_____

Note: We will keep your application on file for only this semester.

Please reapply next semester if you are interested in working here.

PLEASE FILL OUT SCHEDULE INFORMATION ON THE ATTACHED PAGE.

OFFICE USE ONLY	
Emergency Notification _____	
Phone (Day) _____	Phone (Evening) _____
Comments:	
	Check one:
	Work Study <input type="checkbox"/>
	Lab <input type="checkbox"/>
	Cal Works <input type="checkbox"/>
	Volunteer <input type="checkbox"/>
Revised 03/11/15 MM	