SIMPSON COLLEGE
STUDENT EMPLOYMENT APPLICATION

Name:_____ **Student ID#:**_____
(Last) (MI) (First)

Home Address:_____**Phone:**_____
(Street)

_____
(City) (State) (Zip)

E-mail address: _____ **Cell Phone:**_____

Anticipated college graduation date:_____**Will you have an automobile on campus? Yes** ☐ **No** ☐

If you participate in athletics, which sports?_____

Music participation? Yes ☐ **No** ☐ **Academic major or interest?**_____

WORK EXPERIENCE: This information is extremely important in determining your work assignment. Please indicate in detail your previous work experience and your job skills. Use an additional sheet, if necessary.

Employer:_____ **Dates Employed:**_____

Duties/Responsibilities:_____

_____

Employer:_____ **Dates Employed:**_____

Duties/Responsibilities:_____

_____

Special skills, qualifications or certificates (i.e. Lifeguard): _____

_____

_____

Please describe your computer skills: _____

_____

Additional Information:_____

_____

_____

_____

In signing this application, I understand that this application does not guarantee a particular on-campus work assignment. The needs of the College and my skills/abilities will be taken into consideration in determining my work assignment.

_____ _____
Student Signature **Date**