



ATTACHMENT B

TEMPORARY PART-TIME EMPLOYMENT APPLICATION

Date: _____

Name: _____

Local Phone Number: _____
(Area Code)

Local Address: _____
Street City/State/Zip

Permanent Address: _____
Street City/State/Zip

Permanent Phone Number: _____ **Social Security Number:** _____
(Area Code)

If hired, can you furnish proof of age:
Yes _____ No _____

Have you ever been employed at Loyola:

Last Date

Are you a citizen of the U.S. Resident, Alien
or do you have a Visa which permits you to work
here: _____
(You must furnish proof of such if hired)

Are you currently employed by Loyola? (List all departments)

Are you **WORK STUDY** (Federally Funded Program)
eligible? ____ Yes ____ No

What is your current academic level? (circle one)
1st yr 2nd yr 3rd yr 4th yr grad NA

EDUCATION:

List schools or training programs you have attended below:

School	Dates	degree/diploma/certificate
_____	_____	_____
_____	_____	_____
_____	_____	_____

GENERAL OFFICE SKILLS:

_____ Typing _____ wpm _____ Word Processor _____ type

SPECIAL SKILLS:

Certifications: (CPR, WSI, Lifesaving, etc.)

_____ type _____ expiration date

_____ type _____ expiration date

EMPLOYMENT/VOLUNTEER HISTORY:

List the last two (2) employment or volunteer positions you have held.

Name of firm Address Street City/State/Zip

Supervisor Phone Number Paid Position? _____

Dates: _____ Reason for leaving: _____
From To

Duties: _____

Name of firm Address Street City/State/Zip

Supervisor Phone Number Paid Position? _____

Dates: _____ Reason for leaving: _____
From To

Duties: _____

REFERENCES:

Name () Phone

Name () Phone

REASON FOR DOING COMMUNITY SERVICE:

Applicant's Signature _____

Date: _____