# Lab Assitant Application - Advanced Technology Lab

*Please complete all parts of this application form.*
*If you have questions or problems, please contact Jennifer Telfer at Jennifer_Telfer@baylor.edu or ext. 4137.*

| Please indicate the semester(s) you are interested in applying for: | Have you filed with Financial Aid? | Do you qualify for Federal Work Study? |
|---|---|---|
| Fall ◯   Summer I ◯ | Yes ◯   No ◯ | Yes ◯   No ◯ |
| Spring ◯   Summer II ◯ | | |

## Personal Information

| First Name | Last Name |
|---|---|
| | |

| Preferred Name | Baylor ID Number | Local Phone Number |
|---|---|---|
| | | |

| Today's Date | Baylor Email Address |
|---|---|
| | |

| Local Street Address | City | State | Zip Code |
|---|---|---|---|
| | | | |

| Permanent Street Address | City | State | Zip Code |
|---|---|---|---|
| | | | |

## Student Status

| Major | Minor | Class Hours This Semester |
|---|---|---|
| | | |

| Current Academic Classification | Cumulative GPA | Expected Graduation Date | Desired Work Hours/Week |
|---|---|---|---|
| Freshman ◯   Sophomore ◯   Junior ◯   Senior ◯ | | | |

## Work Experience

*Please list the past two employers, starting with the most recent*

**Job #1**

| Employer Name: |
|---|
| Job Title: |
| Dates of Employment: |
| Address: |

| Supervisor: | Contact Number: |
|---|---|
| | |

**Job #2**

| Employer Name: |
|---|
| Job Title: |
| Dates of Employment: |
| Address: |

| Supervisor: | Contact Number: |
|---|---|
| | |

## References

*Please list two PERSONAL references other than former employers and family members.*

**Reference #1**

| Contact Name: | Contact Number: |
|---|---|
| Email Address: | Relationship: | Years Acquainted: |

**Reference #1**

| Contact Name: | Contact Number: |
|---|---|
| Email Address: | Relationship: | Years Acquainted: |

Rating Scale:
1 = Don't Use     2 = Novice Skill     3 = Moderate Skill     4 = Expert Skill

### Operating System:

| | 1 | 2 | 3 | 4 |
|---|---|---|---|---|
| Windows: | ○ | ○ | ○ | ○ |
| Macintosh: | ○ | ○ | ○ | ○ |

### Peripherals/Other:

| | 1 | 2 | 3 | 4 | | 1 | 2 | 3 | 4 | | 1 | 2 | 3 | 4 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Digital Camera: | ○ | ○ | ○ | ○ | Scanners: | ○ | ○ | ○ | ○ | Laser Printers: | ○ | ○ | ○ | ○ |
| CD/DVD Drive: | ○ | ○ | ○ | ○ | Flash Drives: | ○ | ○ | ○ | ○ | Wireless: | ○ | ○ | ○ | ○ |

### Software Applications:

| | 1 | 2 | 3 | 4 | | 1 | 2 | 3 | 4 | | 1 | 2 | 3 | 4 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Word: | ○ | ○ | ○ | ○ | Explorer: | ○ | ○ | ○ | ○ | Visio: | ○ | ○ | ○ | ○ |
| Excel: | ○ | ○ | ○ | ○ | Photoshop: | ○ | ○ | ○ | ○ | Peachtree: | ○ | ○ | ○ | ○ |
| PowerPoint: | ○ | ○ | ○ | ○ | Pagemaker: | ○ | ○ | ○ | ○ | CuteFTP: | ○ | ○ | ○ | ○ |
| Outlook: | ○ | ○ | ○ | ○ | Illistrator: | ○ | ○ | ○ | ○ | Java: | ○ | ○ | ○ | ○ |
| Access: | ○ | ○ | ○ | ○ | MegaStat: | ○ | ○ | ○ | ○ | Oracle: | ○ | ○ | ○ | ○ |
| Publisher: | ○ | ○ | ○ | ○ | Dreamweaver: | ○ | ○ | ○ | ○ | SPSS: | ○ | ○ | ○ | ○ |

List any additional computer skills or applications you are familiar with that you would like us to know abourt:

List any computer related courses you have taken:

Describe the customer service skills you have found to be essential in previous jobs or organizations:

List techniques or attitudes you believe are important in a customer service position:

List any instructional experience you have acquired such as teaching, tutoring or training:

| Schedule | Please follow the directions below carefully, giving the most current information you have available at this time. Do not leave any blanks - put something in each time slot. |
|---|---|

On the schedule template below fill in every time slot according to the following key:

**X-absolutely can not work**          **1-prefer to work**          **2-available to work but would prefer not to**

|  | Sun | Mon | Tues | Wed | Thur | Fri | Sat |
|---|---|---|---|---|---|---|---|
| 8a - 9a | ■ |  |  |  |  |  | ■ |
| 9a - 10a | ■ |  |  |  |  |  | ■ |
| 10a - 11a | ■ |  |  |  |  |  |  |
| 11a - 12p | ■ |  |  |  |  |  |  |
| 12p - 1p | ■ |  |  |  |  |  |  |
| 1p - 2p | ■ |  |  |  |  |  |  |
| 2p -3p |  |  |  |  |  |  |  |
| 3p - 4p |  |  |  |  |  |  |  |
| 4p - 5p |  |  |  |  |  |  |  |
| 5p - 6p |  |  |  |  |  |  |  |
| 6p - 7p |  |  |  |  |  | ■ | ■ |
| 7p - 8p |  |  |  |  |  | ■ | ■ |
| 8p - 9p |  |  |  |  |  | ■ | ■ |
| 9p - 10p |  |  |  |  |  | ■ | ■ |
| 10p - 11p |  |  |  |  |  | ■ | ■ |
| 11p - 12a |  |  |  |  |  | ■ | ■ |

When would you like to start working? _____

Maximum hours per week? _____

Please list any extracurricular activities (organizations, clubs, interests, hobbies, etc), any offices or leadership positions you have held in the organizations, and the times that these extracurricular activities take place during the week :