

**College of Business Administration Computer Labs
Employment Application**

PERSONAL INFORMATION

First Name: _____ Last Name: _____
 ID Number: _____ Phone: (____) _____
 Local Address: _____
 Email Address: _____

UNIVERSITY INFORMATION

Major: _____ Year of Matriculation: _____
 Cumulative G.P.A. _____
 Anticipated Graduation: (Quarter / Year): _____ / _____
 Will you co-op? YES NO
 If yes, when? (Quarter / Year): _____ / _____
 Have you ever worked for UC before? YES NO
 If yes, where? _____
 Will you be taking summer course? YES NO

AVAILABILITY

* Please indicate time slots that you are available to work by placing a mark in the appropriate boxes

	SUN	MON	TUE	WED	THU	FRI	SAT
8 AM	Closed						Closed
9 AM	Closed						Closed
10 AM	Closed						
11 AM	Closed						
12 PM							
1 PM							
2 PM							
3 PM							
4 PM							
5 PM							
6 PM						Closed	Closed
7 PM						Closed	Closed
8 PM						Closed	Closed
9 PM						Closed	Closed
10 PM						Closed	Closed
11PM						Closed	Closed

EXPERIENCE

Please circle the following software that you are familiar with:

Applications

Word

Excel

PowerPoint

Access

MS Project

Web

FrontPage

Eudora

FTP

Internet Explorer

Netscape

Graphics

Photoshop

Illustrator

What operating systems are you familiar with?

Are you familiar with any programming languages? If so, which one(s)?

Do you own a PC?

YES

NO

Have you ever built a PC?

YES

NO

Do you have any previous work experience in a related field? If so, please indicate when, where, and what type of work?

By signing I affirm that the information that I have provided on this form is accurate to the best of my knowledge.

Name _____

Signature _____

Date _____