## Augustana Students' Association APPLICATION FOR EMPLOYMENT



- ASSOCIATION -**General Information** (Please Print) Last Name: First Name: Street Address: City/Province: Postal Code: Home Phone: U of A Email: Cell Phone: Position Applied for: What university year are you currently in? \_\_\_\_\_ Degree/Program: Full time student? How many courses are you taking in the upcoming semester? **Educational Background** High School/Colleges Attended From (Month/Yr) To (Month/Yr) Major G.P.A **Employment History** Previous Employer Duties From To

Extracurricular/Vol	unteer History		
Organization	Duties	How Lo	ong What Year
Position Details Please describe any prev	vious/related experience or	skills you possess for this pos	ition.
Personal/Extracurricular (780) 672-5252. Referen	History. Please have your roces must be submitted by the	eferences attached to your cone application deadline.	each from your Employment History and mpleted application or sent via fax to
Date:		9:	
	ne should clearly reflect h	s application form, a curre ow you meet the posted qu OFFICE USE ONLY:	ent resume, and your academic ualifications.
Date Received:	Reference #1:	Reference #2:	Date of Interview:
Comments:			•
Start Date:	Rate of Pay:	SIN:	Birthdate: