

APPLICATION FOR STUDENT LIBRARY ASSISTANT MURPHY LIBRARY, UW-LA CROSSE

Check one only: FALL SEMESTER [] SPRING SEMESTER [] SUMMER SESSION []

Work study and students who have worked at Murphy Library are given priority in the application process. If you are applying for a student help position but think you may be eligible for work study, please go to the Financial Aid Office, Graff Main Hall, for information. **Please keep this application up-to-date and note that work during exam week is expected.**

Name: (Last, first, middle initial)	Student ID #
Local Address: (Street, city, state, zip)	Local Phone: E-mail:
Permanent Address: (Street, city, state, zip)	Permanent Phone: <i>Please include area code</i>
Status (Underline or bold one): Freshman Sophomore Junior Senior Grad Anticipated date of graduation/leaving UWL: _____ Are you employed elsewhere on campus? Yes [] No [] If yes, department?_____ Hours/week? [] How many hours would you like to work? [] Are you willing to work weekends? Every [] Most [] No [] Will you be available to work summer session? Yes [] No [] Inter-sessions you can work: Jan. [] May [] Aug. []	

Complete the schedule below. Use "X" to mark times you are not available to work.
 Include classes and other scheduled activities such as band and athletic practice.

	Mon	Tues	Wed	Thur	Fri	Sat	Sun
7:30 am							
8:00 am							
9:00 am							
10:00 am							
11:00 am							
12:00 pm							
1:00 pm							
2:00 pm							
3:00 pm							
4:00 pm							
5:00 pm							
6:00 pm							
7:00 pm							
8:00 pm							
9:00 pm							
10:00 pm							
11:00 pm							

Previous library experience:

Other work experience:

List special skills, such as: typing, filing, data entry/retrieval, word processing (list specific software programs), computer courses, public relations, detail work, etc.

Are you willing to work evenings?

If employed, I agree to regularly work my designated schedule. I understand that work during exam week is required and that my schedule will be adjusted to accommodate my exam schedule. I agree to immediately notify my supervisor and the administrative office of any changes in eligibility or work study allocation.

My typed name indicates my agreement to the above statement.

Name:

Date: