PRINT CLEARLY all requested information in black or blue ink.

Full name: ___________________________________ Commuter? _____ Reside on campus? ____

Cell phone# ________________________________ Expected month and year to graduate: ______

Student ID: ________________________________

Have you applied for Work Study?  __ Yes  __ No

Have you received Work Study in past?:  __Yes  __ No

If yes, how much did you receive for YEAR: $ _______

During the Fall of 2016 will you be a:  __ Freshman  __ Sophomore __ Junior __ Senior

What is your major(s): ________________________________________________

Do you have another job(s) on campus? If so, where? Doing what? ________________________________

Are you willing to work the entire school year or do you plan on transferring: ___ no ___yes

Anything you would like us to know concerning your schedule or skill sets?: __________________________________________

List all times you CAN work below.  Indicate if AM or PM

Sunday 6-10PM: __________________________________________

Monday 9AM-9PM: _________________________________________

Tuesday 9AM-9PM: _________________________________________

Wednesday 9AM-11PM: _____________________________________

Thursday 9AM-8PM: _________________________________________

Friday 9AM-5PM: _________________________________________

You MUST attach a copy of your class schedule to this form.
Pass in this form to Joy Miller, Room 253 (Color Print Center) by May 11th.
Hires will be contacted mid July to mid August so watch your UMD email.
CONTACT: jmiller@umassd.edu  508 910-6981