STUDENT EMPLOYMENT APPLICATION
Summer

PERSONAL INFORMATION

NAME: _____
Last First MI

HOME ADDRESS: _____ **HOME PHONE:** (___)_____
Street City State Zip

LOCAL ADDRESS: _____ **CELL PHONE:** (___)_____
Street City State Zip

CAMPUS EMAIL ADDRESS: _____

Are you taking summer classes at the Mount? *(please check one)* ☐ Yes ☐ No

If yes, which session(s) are you enrolled in? (*(please check one)* ☐ 1st Session ☐ 2nd Session

Will you be working at the Mount? ☐ Entire Summer ☐ 1st Session ☐ 2nd Session

Have you worked for the University before? _____ If yes, where? _____

What is your major? _____

What type of work do you prefer? _____

PAST EXPERIENCE

List your last two (2) employers:

NAME OF BUSINESS	ADDRESS	DATES EMPLOYED	WORK PERFORMED
1.			
2.			

List any special skill you have *(i.e. clerical, carpentry, bookkeeping, computer, lifeguarding, etc.)*

REFERENCES

List two (2) on-campus references. If you are a Freshman, list two (2) personal references.

NAME	DEPARTMENT OR HOME ADDRESS
1.	
2.	

I certify that answers given herein are true and complete to the best of my knowledge.

_____ _____
Applicant's Signature Date

Return Application to:

Mount St. Mary's University | Department of Human Resources | or fax to (301) 447-5864
www.msmary.edu