TRUMAN STATE UNIVERSITY STUDENT RECREATION CENTER STUDENT EMPLOYMENT APPLICATION FORM

Applying to work in Fall (please highlight one):	Spring	Summer	2024	
Name:				
Email:				
Cell Phone:		Local Phone:		
Local Address:				
Permanent Address:				
City:		State:	Zip code:	
Expected Date of Graduation:		Intend to stay for Grad	uate School: Yes/No	
Present classification: Freshman	Sophomore	Junior Senior	Graduate student	
Banner ID:			_	
Major:				
Position(s) Desired (rank in order if applicable)	Intramura	al Official		
	Instructional Program Leader			
	Member Services Desk Clerk			
	Weight R	oom Instructor		
Hours of work per week:	,			
Type of work desired:	Work Study			
	Institutional			
	Scholarship Hours	8		
Are you currently employed? If yes, where and how many hours per week?				
Do you know anyone that currently works in the Student Recreation Center? If yes, who?				
List any special training, certifications, or	or qualifications? (att	ach copies of certificates)		

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University and community activities/organizations in which you plan to participate next semester/year?			
	University Faculty/Staff references we may contact		
Contact 1 Name			
Position at Truman			
Phone Number + Email			
Contact 2 Name			
Position at Truman			
Phone Number + Email			
	Previous Employment Reference 1		
Supervisor's Name			
Business Name			
City/State			
Dates of Employment			
Your Position Title			
Your Responsibilities			
	Previous Employment Reference 2		
Supervisor's Name	. v		
Business Name			
City/State			
Dates of Employment			
Your Position Title			
Your Responsibilities			