

WORK-STUDY JOB APPLICATION EDUCATIONAL RESOURCES LAB

Thank you for your interest in working at the Educational Resources Lab, 350 Pawley Hall. Please complete all areas of this application, save to your computer and email to Alicia Arbour, Circulation Manager. aarbour@oakland.edu If you have questions, you may call Mrs. Arbour at (248) 370-4230.

ABOUT YOU		
NAME:	EMAIL:	
CAMPUS ADDRESS:		
CELL PHONE: ()		
PERMANENT ADDRESS:		
CITY:	STATE: ZIP:	
EDUCATIONAL/WORK RELATED		
□FR. □SO. □JR. □SR. □GRAD. (PLEASE C	CHECK ONE)	
MAJOR:	HOURS PER WEEK DESIRED:	
DO YOU HAVE WORK STUDY? ☐ YES ☐ NO		
HOW MUCH ARE YOU ELIGIBLE TO EARN?: \$	3	
HOW DID YOU HEAR ABOUT THIS POSITION?	□ WORD OF MOUTH □ ERL WEB SITE	
	□ OU/HANDSHAKE □ OTHER	
ARE YOU CURRENTLY OR HAVE YOU BEEN E	EMPLOYED BY ANY OTHER DEPARTMENT AT OU? □ YES	□ NO
IF YES, WHICH DEPARTMENT AND HOW	MANY HOURS?	
SUPERVISOR'S NAME:		
PERSONAL INTERESTS		
HOBBIES, INTERESTS, OR SPECIAL SKILLS:		
EXTRA- CURRICULAR ACTIVITIES (SCHOLAR	OR ATHLETIC):	
HONORS, AWARDS OR LEADERSHIP POSTION	IS HELD:	
DO YOU HAVE SPECIAL QUALIFICATIONS OR	R INTERESTS THAT MAKE YOU FEEL ESPECIALLY SUITABLE FOR	₹
WORKING IN A POSITION SUCH AS THIS?		

PREVIOUS EMPLOYMENT	
Please list in chronological order beginning with your current or most recent position.	If no previous employment, please list personal
references.	

EMPLOYER, CITY AND PHONE NUMBER	EMPLOYMENT DATES TO AND FROM	YOUR POSITION, DUTIES & SUPERVISOR'S NAME	REASON FOR LEAVING

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Please list three references we may contact regarding your work performance and personal abilities (please use professional or business references)

NAME	PHONE	RELATIONSHIP

SIGNATURE

THE OAKLAND UNIVERSITY BOARD OF TRUSTEES HAS DIRECTED THAT ACTIONS BE TAKEN TO PEREVENT DISCRIMINATION AGAINST ANY EMPLOYEE OR STUDENT ON THE SOLE BASIS OF AGE, COLOR, DISABILITY, ETHNICITY, GENDER, MARITAL STATUS, NATIONAL ORGIN, RACE, RELIGION, SEXUAL ORIENTATION OR VETERAN STATUS. I CERTIFY THAT ALL THE INFORMATION GIVEN IN THIS APPLICATION IS TRUE. I UNDERSTAND THAT ANY FALSE STATEMENT MADE HEREIN OR OMISSION OF CONVICTIONS OR CURRENT CRIMINAL CHARGES IS SUFFICIENT REASON FOR REJECTION OF THIS APPLICATION OR TERMINATION OF SUBSEQUENT EMPLOYMENT. I FURTHER AUTHORIZE THE UNIVERSITY TO INVESTIGATE ALL STATEMENTS MADE ON MY APPLICATION FOR EMPLOYMENT. I AUTHORIZE SUCH EDUCATIONAL INSTITUTIONS AND EMPLOYERS AND OTHERS (AND THEIR AGENTS OR EMPLOYEES) TO RESPOND TO QUESTIONS CONCERNING INFORMATION GIVEN ON THIS APPLICATION AND FUTHER RELEASE FROM LIABILITY SUCH FORMER EMPLOYERS, INSTITUTIONS OR PERSONS PROVIDING SUCH INFORMATION TO THE UNIVERSITY. OAKLAND UNIVERSITY HAS A POLICY ON NEPOTISM. SHOULD A CONDITION ARISE CONCERNING THIS POLICY, IT IS THE DUTY OF THE APPLICANT/ EMLOYEE TO DISCLOSE THIS TO THE SUPERVISOR.

$\ \square$ By clicking here, this serves as my signature, that I acknowledge and understand the above paragraph.
Date:

Please fill out class schedule and other academic commitments on the Student Work Planning Schedule on ERL website. Work schedule will be based on your hours available outside of your course schedule. Preferred times may be requested, but the schedule will ultimately be based on your course and academic schedule. Once established, the schedule should remain consistent throughout the session.