Human Resources, Sacred Heart Hall, Room 201 Ph: 316-942-4291, ext. 2202 Email: munstermank@newmanu.edu

INCOMPLETE OR UNSIGNED APPLICATIONS WILL NOT BE CONSIDERED

Submit this application directly to the Human Resources Department, Sacred Heart Hall, room 201.

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POSITION FOR											
YOU ARE AP	<u>PLYIN</u>										
Last Name		First Nam	ne			Middle Name					
Street Address of residence while	4 NII I	G., G.									
Street Address of residence while	e at NU	City, Sta	City, State				Zip Code				
Permanent Address	City Sto	City State				7in Codo					
remailent Address		City, Sta	City, State				Zip Code				
Phone number(s) where you can be		Student II	Student ID Number				Email				
reached	an oc	Student	Student ID Ivaniber				Linan				
Touched											
Major area of study:											
Grade level - check one		FRESHMAN SOPHOMORE				E JUNIOR SENIOR					
						UNION		BENION			
Expected Graduation Da		7.5077	TO THE CO	1 ****				1	G 4 F		
Availability	SUN	MON	TUES	WED	TH	UK	FRI		SAT		
a.m.											
p.m.											
How many hours are you availab		·	20 hours ma.	ximum							
regardless of employment in other											
Are you eligible for the Federal	udy Program?	y Program?				ES NO DON'T KNOW					
(Check one)	Narrana IIair					If was give dates or					
Have you previously been emplo	Newman Univ	· · · · · · · · · · · · · · · · · · ·				Yes If yes, give dates & department					
Dates	Department										
Dates		Department									
SKILLS: List skills pertinent to	the pos	ition for which	h you are ap	plying, and any	other sk	cills yo	ou possess su	ıch a	as foreign		
languages, typing, computer soft	ware/pro	ogramming, m									
SKILL AREA				PROFICIENCY LEVEL							
(e.g. language, software, program	carpentry)	(e	(e.g. typing speed, etc)								

WORK HISTORY: List	relevant work or volunteer experience.	, beginning with th	e current	or most recent	·						
Employer											
Address		City		State	ZIP						
Supervisor			Phon	ie							
Dates Employed (Mo/Yr)	From	То									
Your Position Title											
Job Responsibilities											
Employer	T										
Address					- TTD						
Supervisor		City	Phon	State	ZIP						
Dates Employed (Mo/Yr)	From	То	Thon								
Your Position Title	FIOIII	10									
Job Responsibilities											
1											
Employer											
Address		City		State	ZIP						
Supervisor			Phon	ie							
Dates Employed (Mo/Yr)	From	То									
Your Position Title											
Job Responsibilities											
<u> </u>											
I authorize you to contact n	my former employers (Check One)	∐Yes 	No								
	victed of, or pleaded guilty or "no c	ontest" to a felon	y or crin	ninal offense,	excluding						
misdemeanors and traffic	` / _	☐ No									
If Yes , please explain briefly:											
	l not necessarily be a bar to employ			_							
seriousness and nature of	f the offense, and the applicant's rel	habilitation will b	oe consid	ered in the hi	ring decision."						
PLEASE READ BEFORE SIGNING THIS APPLICATION:											
I certify that the information in this application is complete and correct to the best of my knowledge. I agree to conform to the rules and regulations of Newman University and understand that my employment and compensation can be terminated											
with or without cause and v	with or without notice, at any time, at t	me opnon of either	newman	University or	mysen.						
V											
X											
	g.										
	Signature				Date						

OFFICE USE ONLY											
☐ Work Study Eligible ☐ International Student ☐ Regular Student Worker (non work study)											