INDIANA UNIVERSITY SOUTH BEND
Franklin D. Schurz Library
Dorothy J. Wiekamp Educational Resource Commons
STUDENT ASSISTANT PART-TIME EMPLOYMENT APPLICATION

PERSONAL INFORMATION

Name

Last

First

Middle

Date of Application

School Address

Street

City

State/Zip Code

Permanent Address

Street

City

State/Zip Code

Birth Date (optional)

Phone:

E-Mail Account:

You must provide a phone number and/or E-Mail Account at which you can be reached. If a job opening arises, an attempt will be made to contact you at the number/account you have provided for 48 hours. If a message is left for you at the phone number or on your E-mail Account, you must respond within 24 hours or your application will be returned to the files until the next job opening.

If you are an international student please show type of visa:

Have you registered with the Office of International Student Services?  

Yes_______No_______

Are you eligible for Work Study?_____________________

Education (High School, Business School, College)

<table>
<thead>
<tr>
<th>School</th>
<th>City/State/Country</th>
<th>Years Attended (from-to)</th>
<th>Major</th>
<th>Years Completed</th>
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Work Experience (Begin with most recent)

<table>
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<tr>
<th>Dates (from-to)</th>
<th>Company</th>
<th>City/State/Country</th>
<th>Job Title</th>
<th>Duties</th>
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Computer Experience/Knowledge:

Software: ____________________________________________________________

Keyboarding: _______________________________________________________

Programming Language: _____________________________________________

What semesters are you available to work at the Library?

Summer I__  Summer II__  Fall__  Spring__

Your expected Graduation date:____________________

Times available to work:  

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<th>Current Class Schedule:</th>
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<td>Monday</td>
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<td>Saturday</td>
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<td>Sunday</td>
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PLEASE RETURN THIS FORM TO THE LIBRARY ADMINISTRATIVE OFFICES, ROOM 304, BETWEEN 8 AM TO 12 NOON AND 1 PM TO 5 PM MONDAY THROUGH FRIDAY.

This application will be held until the end of the current semester or summer session. If you are still interested at the end of that time, please re-apply.
Employment Application Form

Indiana University is an Equal Opportunity/Affirmative Action Employer.

Name (print) ____________________________ (Last) ____________________________ (First) ____________________________ (Middle)

Are you over 18 years of age? □ yes  □ no

If required for the position, do you hold a valid driver’s license? □ yes  □ no

Are you legally authorized to work in the United States? □ yes  □ no

Are you a current Indiana University employee? □ yes  □ no
   If yes, date started, position, and location __________________________________________

________________________________________

Have you ever been employed by Indiana University in the past? □ yes  □ no
   If yes, your name (if different), date started and left, position, and location __________________________________________

________________________________________

Have you ever been convicted of a criminal offense that has not been expunged, restricted, or sealed by a judge? □ yes  □ no

Convicted means you were declared guilty by a judge or you pleaded guilty in court. A conviction may have even taken place if you did not pay a fine or spend time in jail or in prison. A conviction could have been for either a misdemeanor or a felony. Certain traffic offenses rise to the level of a misdemeanor or felony and must be declared; examples include driving under the influence, driving on a suspended license, reckless driving, leaving the scene of an accident, and vehicular homicide. A criminal history investigation is done on each new employee, and employment with the University is conditional, subject to the findings of a criminal history investigation. Answering yes to this question does not automatically disqualify you for employment; however, information obtained from the investigation will be used in the employment review process.

   If yes, you must disclose for each offense: date, charge, city, state and disposition;
   (Include type of offense (e.g., misdemeanor, felony) and judgment (e.g., guilty, conditional dismissal).)
   __________________________________________
   __________________________________________
   __________________________________________

________________________________________

Notice:

Indiana University is an Equal Opportunity/Equal Access/Affirmative Action institution. IU intends to maintain an alcohol and drug-free workplace and to comply with the Drug Free Workplace Act of 1988 and its amendments. To that end, all employees must comply with the University’s Substance Free Workplace policy. Annual security and fire safety reports containing policy statements and crime and fire statistics for Indiana University campuses are available at protect.iu.edu/police/crimestats/.

Please read and sign the following statement:
I certify that all information provided in all my application material is true. I understand that any false statement made herein is sufficient reason for rejection of this application or termination of subsequent employment regardless of date of discovery. I authorize the university to investigate all statements made in my application material for employment. I authorize such educational institutions and employers and others (and their agents or employees) to respond to questions concerning information given in this application material and I further release from liability such former employers, institutions, or persons providing such information to the university.

I understand that an offer of employment from Indiana University will be contingent on the receipt and evaluation of the background check report. Disclosure of convictions within this application does not automatically disqualify me for employment; however, information obtained from the investigation will be used in the employment review process.

I agree that the university may require my participation in and contribution to retirement programs while employed. I also understand that the direct deposit of my paycheck to my personal checking or savings account is a condition of employment. I understand that no offer of benefits such as a pension plan, insurance, vacation, or salary rate is final until cleared by Human Resources, and fully approved by appropriate university officials.

I have carefully read and understand this statement and, by my written or electronic signature below, note such.

________________________________________
(Signature of Applicant)

________________________________________
(Date)

All questions and statements must be answered in full or your application will not be processed.
Name (print) __________________________ (Last) __________________________ (First) __________________________ (Middle)

Address __________________________ (Street) __________________________ (City) __________________________ (State) __________________________ (Zip code)

Phone #s __________________________ (Home) __________________________ (Business) __________________________ (Cell) __________________________ E-mail __________________________

What type of work will you accept? (check all that apply)
☐ Full Time ☐ Part Time ☐ Days ☐ Professional ☐ Maintenance ☐ Custodial ☐ IT/computer
☐ Temporary ☐ Seasonal ☐ Evenings ☐ Dining Service ☐ Clerical ☐ Technical ☐ Other (please specify) __________________________
☐ Weekends __________________________

EDUCATION

<table>
<thead>
<tr>
<th>Name</th>
<th>City</th>
<th>State</th>
<th>Highest Grade Completed</th>
<th>Graduated?</th>
<th>University or College Major/Degree and year obtained for verification purposes only</th>
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<td>High School or GED</td>
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WORK HISTORY

List your work history for at least the past seven years. Begin with the most recent position. A supplemental work history form is available if needed.

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<tr>
<th>From</th>
<th>To</th>
<th>Name of Firm</th>
<th>Address</th>
<th>Duties Involved</th>
<th>Supervisor</th>
<th>Salary</th>
<th>Reason for Leaving</th>
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Special skills/foreign languages/certifications/licenses __________________________

Special equipment/computer hardware or software/industrial machinery/video or teleconferencing __________________________

UHRS 7/2013