

WORK-STUDY APPLICATION 2019-2020

Approved by FAO for Work Study

To apply for a Work Study position you must complete each of these steps:

- 1. Your FAFSA application must be on file for the 2019-20 aid year.
- 2. Create your student account on the SFSC College Central Network System at www.collegecentral.com/southflorida
- 3. Download and complete this application, scan a copy of it *and* your fall class schedule, and upload them (as a single document) to Resumes in your SFSC College Central Network account. (No handwritten applications will be accepted.)

I. STU	TUDENT INFORMATION				
Full Legal Name		Student ID (GID)			
Permanent Address					
	Street	City and State	Zip Code		
Telephone Number (include area code)	Home:	Date of Birth			
	Alternative:				
Email Address:					
College Major or					
Program of Interest					

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	II. YOUR WORKPLACE SKILLS					
Please select each of the following skills that you already mastered,						
	and indicate where and when you used them most recently in a job-related situation.					
Check	Skill	Where Did You Use This Skill in the Workplace?				
	Typing/word processing					
	Typing speed: wpm					
	Filing					
	Bookkeeping					
	Reception Desk/Greeter					
	Answered Office Phones					
	Assisted Customers,					
	Clients or Students					
	Public Speaking/Sales					
	Email					
	Social Media					
	Microsoft Word					
	Microsoft Excel					
	Microsoft PowerPoint					
	Internet Research					
	Basic Computer Skills					
	Use of FAX Machine					
	Use of Copy Machine					
	Use of Video Equipment					
	Other (Describe)					
	, , ,					

	Location	on (City, State)	
Employer 1		visor's Name	
	You	ur Job Title	
	S	tart Date	End Date
	Job Re	esponsibilities	
		•	
		iness Name	
		on (City, State)	
Employer 2		visor's Name	
		ur Job Title	
	S	tart Date	End Date
	Job R	esponsibilities	
	_		
		iness Name	
		on (City, State)	
Employer 3		visor's Name	
		ur Job Title	
		tart Date	End Date
	Job R	esponsibilities	
	Descri	Constant	
		iness Name	
Employer 4		on (City, State)	
Employer 4		visor's Name	
		ur Job Title	
		tart Date	End Date
	Job Responsibilities		
IV.			nent References
			contact information of at least two people who can verify your previous
	work	k/volunteer/inter	nship experience, your reliability, and your skills.
Name			
Phone Number			
Email Address			
Your Job Title			
How Do You Know			
This Person?			
(Former employer, co- worker, teacher, etc.)			
Name			
Phone Number			
Email Address			
Your Job Title			
How Do You Know			

Provide the requested information about paid employment you have held. You may also include internships and lengthy volunteer experiences where you used work-related skills.

III.

This Person? (Former employer, coworker, teacher, etc.)

YOUR EMPLOYMENT HISTORY

Business Name

taking in this term below, including the starting/ending time and day(s) of the week of class meetings for each. **Check the Days of the Week Course Title** Meeting on Which This Class Meets Time(s) Mon. Tue. Wed. Thur. Fri. Which Work Study Jobs are You Interested in Applying For? VI. (Please list a NO MORE than 3) Job Number Department or **Explain Why You Are Interested- and** (from College **Qualified- for This Position** Job Title **Program** Central) VII. **Applicant's Signature and Agreement of Understanding** I understand that the contents of this application form will be used by the College for the process of interviewing students interested in Work Study positions and in offering Work Study possible employment for Work Study assignments. I understand that, to be considered for any position, my application must be completely filled and be uploaded to my SFSC College Central student account. My signature verifies that all the information I have provided is true and complete to the best of my knowledge. I understand that this information may be shared with SFSC department supervisors who will be interviewing students for Work Study positions. **Printed Name** Signature Date

To help us determine your availability for work study positions, list all the classes you are

Your Class Schedule for This Term

V.

SFSC IS AN EQUAL ACCESS/EQUAL OPPORTUNITY INSTITUTION

THIS PAGE TO BE COMPLETED BY INTERVIEWER ONLY

Student Applicant's Name							
Work Study Position(s)							
Date of Interview							
Name of Interviewer							
Interviewer's Position							
Instructions for the Interviewer: 1. Please meet with the student applicant in person. 2. Complete the Interviewer's Ratings below, and note hiring decision. 3. Return completed form directly to Mary Puckorius in the SFSC Career Development Center.							
Skill or Trait		Interviewer's Rating Yes No Did Not Meet					
Did/does the student ap	plicant	163	140	Requirement			
Arrive on time for the inte				-			
Dress in neat, clean and a							
Communicate clearly and							
Display confidence and m							
Describe understanding of							
Have the skills needed to							
Have scheduling availabil							
Show interest and enthus							
Respond well to interview							
Ask questions about the j							
11	w skills needed for the job?						
Have a friendly and positive attitude?							
Interviewer's Overall Im	pressions:						
Outcome of Ctudent	Non Colonted for the list	Chudent Was	Not Coloate	d for the Job			
	Was Selected for the Job	Student was	Not Selecte	a for the Job			
Interview							
Interviewer's							
Signature							

Please return this original signed form to Mary Puckorius (Career Development Center)

Highlands Campus (B-111) Mary.Puckorius@southflorida.edu
Phone: (863) 784-7442 FAX: (863) 784-7319