

Loyola Marymount University

Student Worker Application

Personal Information

Name: _____ Social Security: _____

Local Address: _____ E-mail: _____

Permanent Address: _____

City, State: _____ Zip Code: _____ Cell Phone: _____

Name of last High School Attended: _____

City, State: _____ Zip Code: _____ Date of Attendance: _____

Cumulative GPA: _____ SAT Score: Math _____ Verbal _____

If currently in College, please answer the following questions:

Cumulative GPA: _____ Class Level: _____ Units completed: _____

Major: _____ Minor: _____

Are you on Work Study at the present time? Yes ___ No ___

Other Colleges and Universities you have attended: _____

LMU ID (if applicable): _____

Informative Essays

For the program to get to know you, the applicant, on a more personal level, please answer the following short answer questions. Please limit your answer to no more than two paragraphs.

1. What is your reason for applying to the Student Worker Program? Who or what influenced you to apply for the Student Worker Program?
2. What traits, skills or competencies could you bring to the Student Worker Program? In answering this question, please describe your work ethic.
3. Briefly describe any awards or honors you have received during high school and/or college.
4. Describe your interests and hobbies.

References

Please list three references that we may contact about your employment and /or volunteer history.

Name: _____ Relationship: _____

Address: _____

Current Phone: _____

Name: _____ Relationship: _____

Address: _____

Current Phone: _____

Name: _____ Relationship: _____

Address: _____

Current Phone: _____

Job Experience

Please list your past job experience starting with your most recent employment.

Job Title: _____ Employer: _____

Dates Employed: Starting _____ Ending _____

Supervisor's Name and Phone Number: _____

Duties and Responsibilities: _____

Job Title: _____ Employer: _____

Dates Employed: Starting _____ Ending _____

Supervisor's Name and Phone Number: _____

Duties and Responsibilities: _____

Job Title: _____ Employer: _____

Dates Employed: Starting _____ Ending _____

Supervisor's Name and Phone Number: _____

Duties and Responsibilities: _____

Job Title: _____ Employer: _____

Dates Employed: Starting _____ Ending _____

Supervisor's Name and Phone Number: _____

Duties and Responsibilities: _____

Grade Point Release Form

I, _____, understand that I must have a cumulative grade point average of 2.0 and maintain a 2.0 each semester in order to continue in the Student Worker Program. I further understand that I must be free from disciplinary probation in order to continue in the Student Worker Program. Finally, I understand that the Student Worker Program is one based on financial need. So that the program may confirm if my standing is acceptable, I authorize the Club & Program Coordinator in Student Leadership & Development to receive my grade point average and information on my disciplinary record and my financial need during each semester of my involvement for the duration in the Student Worker Program.

Printed Name

Social Security Number

Signature

Date

Address

City, State & Zip

Parent's Signature (if student is under 18)