

## UNIVERSITY OF RICHMOND STUDENT EMPLOYMENT APPLICATION

Department to Which You A	.re Applying:Date:
Personal Information:	
	UR ID:
Local Address:	
Email Address:	
Local Phone #:	Best Time(s) to Call:
Home Address:	
Home Phone #:	
Emergency Contact:	Phone #:
Term(s) Applying For: Fall	Spring □ Summer □ Date Available:
Intended Major:	Minor:
Approximate GPA:	Expected Graduation Date:
Are you eligible for Federal Work St	tudy as part of your financial aid award? Yes 🗆 No 🗖
Have you ever been convicted of a forcircumstances.)	elony? Yes $\square$ No $\square$ (If yes, please attach a full explanation of the
Do you have a valid driver's license	Yes □ No □
	es $\square$ No $\square$ (If yes, please note that all student athletes who secure of Director of Compliance in the Athletic Department.)
without pay. Attach another sheet if	have held beginning with the most recent first. Include internships and join necessary.
ON-CAMPUS Employment	
Job Title:	Department:
_	Dates Employed:
Paid Job? Yes No No	Internship? Yes No No
Job Title:	Department:
Supervisor:	Dates Employed:
Paid Job? Yes No No	Internship? Yes No No
	(continued on back)

OFF-CAMPUS Employment	
Job Title:	Employer:
Supervisor:	Dates Employed:
Job Title:	Employer:

Supervisor: \_\_\_\_\_ Dates Employed: \_\_\_\_\_

**Class Schedule and Other Activities:** On the schedule below, please mark all times when you CANNOT work. Use a "C" to designate times that you are in class, and an "O" to designate times when other activities preclude you from working at that time. Place the appropriate letter in the block that most accurately reflects the time of your commitment (Classes or Other activities).

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
8 a.m.	8:15	8:15	8:15	8:15	8:15		
9 a.m.	9:20	9:45	9:20	9:45	9:20		
10 a.m.	10:25		10:25	9:43	10:25		
11 a.m.	11:30	11:15	11:30	11:15	11:30		
12 p.m.	12:30	12:45	12:30	12:45	12:30		
1 p.m.	1:35	12.43	1:35	12:45	1:35		
2 p.m.	2:40	2:15	2:40	2:15	2:40		
3 p.m.	3:45	3:45	3:45	3:45	3:45		
4 p.m.							
5 p.m.							
6 p.m.							
7 p.m.							
8 p.m.							
9 p.m.							
10 p.m.	-			-			

I certify that the information provided on this application for employment is complete, factually correct and honestly presented. I understand that this document is an application for employment, separate and apart from my permanent educational record and is for the use of the hiring department and the Student Employment Office only. In consideration for my employment, I agree to conform to all current and subsequent rules and regulations of the University of Richmond and the area for which I will be working.

University of Richmond and the area for which I will be working.				
Signature Date				
For Departmental Use Only				
Interviewed? Yes   No   If no, reason:				
Hired? Yes □ No □ If no, reason:				
Tax Forms Complete? ☐ Job Approval Form Sent? ☐ Pink copy received from Student Employment? ☐				
Date of Termination: Reason:				
$ Student \ Employment \ Office \ must \ be \ notified \ of \ any \ terminations \ which $				
occur prior to the end of the academic and/or summer payroll period.)				



## UNIVERSITY OF RICHMOND LIBRARIES JOB QUESTIONNAIRE

Name:	Date:
1.	Why do you want a position in Library Services?
2.	What qualities do you look for in a job?
3.	What do you feel is your strongest single asset?
4.	What do you feel is your weakest single asset?
5.	Briefly describe yourself and your personality.
6.	What did you like and dislike about your last position?

7. Why should we hire you
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0.	I icase rate vour	Compater	CADELICITE	anu Knuv	ขายนยย บา	cach nem	ածութ աու	stait

0 = no experience 2 = can answer most questions

1 = can answer easy questions 3 = expert

PC Related Software	Programming Languages	
Windows XP	HTML	
Microsoft Word (2002)	JavaScript	
Microsoft Excel (2002)	PERL	
Microsoft Access (2002)	C++	
Microsoft PowerPoint (2002)	Visual Basic	
Microsoft Outlook (2002)	Roxio Easy CD Creator	
Microsoft FrontPage (2002)	FTP Explorer	
SPSS	WinQvt Net	
SAS		
Netscape		
Omnipage		
Photoshop		
Internet Explorer		
ArcGIS		
Mathematica		
Adobe Acrobat		
Microcase		

**Other Computer Experience** (Please list other computer experience that you have.)

**Supervisor's Notes:**