ASMSA Work Service Job Application

Students: Return the COMPLETED form to your Residential Mentor. (The due date to turn in your work service applications will be announced by email and at floor meetings each nine weeks.)

CAUTION: Please do not leave this form with your supervisor assuming they will sign it. Stay with your supervisor until the form is signed and then return it to your Residential Mentor by the due date at your floor meeting!!! Any forms turned in incomplete or without valid signatures will be tossed out. Students who are not timely in turning in their job applications **may be subject to disciplinary action.**

Student Nan	ne (Last, First):						
I am applying	g for the follow	ing job:					
Job Title :library aide, etc.)			(cafeteria worker, maintenance asst., teacher aide, studen				
Classification	n: Junior □	Senior					
Location of Work Service:			Supervisor:				
My RM is:			My room number is:				
Student Signature:			Date:				
	The s	ection below	must be com	pleted by the	e supervisor	!	
I accept this s	tudent for work	service in the p	osition indicated	d above.			
			ilities as this stu erformance to th				program
Signature:			Date:		_Office Phone	:	
	The student ar	nd I have agree	d that he/she w	ill work the fol	lowing days ar	nd hours:	
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	

Revised: August 2015