**ASMSA Junior Work Service Application Form**

***Students: Return the COMPLETED form to the Senior Residential Mentor.***

**CAUTION:** *Please do not leave this form with your supervisor assuming they will sign it. Stay with your supervisor until the form is signed. 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 Name:** (Last, First):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Job Assignment :**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_( cafeteria worker, maintenance asst., teacher aide, student library aide, etc.)

**Location of Work Service:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Supervisor:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**My RM is:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**My room number is:** \_\_\_\_\_\_\_\_\_\_\_\_\_

**Student Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_

***The section below must be completed by the supervisor.***

I accept this student for work service in the position indicated above.

I understand and agree to fulfill all responsibilities as this students’ supervisor in the ASMSA work service program and I will report my student’s work service performance to the Senior Residential Mentor, Kelsay Williams.

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_**Office Phone:** \_\_\_\_\_\_\_\_\_\_

*The student and I have agreed that he/she will work the following days and hours:*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Sunday** | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** | **Saturday** |
|  |  |  |  |  |  |  |

*Revised:* August 2018