

HAMERSLY LIBRARY STUDENT EMPLOYEE APPLICATION

TERM APPLYING FOR (select one): **Fall** ☐ **Winter** ☐ **Spring** ☐ **Summer** ☐ APPLICATION DATE: _____

NAME: _____ E-MAIL: _____
LAST FIRST MI

LOCAL ADDRESS: _____ HOME ADDRESS: _____

LOCAL PHONE: _____ HOME PHONE: _____

CLASS (select one): Freshman ☐ Sophomore ☐ Junior ☐ Senior ☐ Graduate ☐ EXPECTED GRADUATION YEAR: _____

MAJOR: _____ MINOR(S): _____

DO YOU HAVE ANOTHER JOB ON CAMPUS? ☐ YES ☐ NO WHERE? _____ HOURS/WEEK: _____

DO YOU HAVE A FEDERAL WORK STUDY AWARD THIS YEAR? ☐ YES ☐ NO AMOUNT: _____

ARE YOU WILLING TO WORK: WEEKENDS? ☐ YES ☐ NO ALTERNATE WEEKENDS? ☐ YES ☐ NO

DEPARTMENTS YOU PREFER TO WORK: ☐ Administration ☐ Access & Research / Public Services
(mark all that apply) ☐ Archives ☐ Collection Development / Technical Services

HOW MANY HOURS PER WEEK DO YOU PREFER TO WORK? _____ (Typical campus limit is 20; more if approved)

OTHER COMMITMENTS WHICH MAY IMPACT YOUR WORK SCHEDULE? _____

Please code your availability schedule with: W = Available to work C = Class X = Unavailable

Enter a code for each day/hour. The library is CLOSED on blacked-out slots. Library may not be open all hours listed below.

	8-9	9-10	10-11	11-12	12-1	1-2	2-3	3-4	4-5	5-6	6-7	7-8	8-9	9-10	10-11	11-12
Mon																
Tues																
Wed																
Thurs																
Fri																
Sat																
Sun																

SOFTWARE SKILLS (check boxes to indicate your experience with the selected software categories, as well as programs you've used)

Word Processing: ☐ None ☐ Classroom Instruction ☐ Used Professionally Software Name(s): _____

Spreadsheets: ☐ None ☐ Classroom Instruction ☐ Used Professionally Software Name(s): _____

Library Databases: ☐ None ☐ Classroom Instruction ☐ Used Professionally Software Name(s): _____

Audio/Video Editing: ☐ None ☐ Classroom Instruction ☐ Used Professionally Software Name(s): _____

Graphic Design: ☐ None ☐ Classroom Instruction ☐ Used Professionally Software Name(s): _____

Web Design: ☐ None ☐ Classroom Instruction ☐ Used Professionally Software Name(s): _____

Other Software: ☐ Classroom Instruction ☐ Used Professionally Software Name(s): _____

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PLEASE ATTACH A RESUME WITH WORK/VOLUNTEER EXPERIENCE & 3 WORK/VOLUNTEER REFERENCES

At Western Oregon University (WOU), no qualified person shall, solely by reason of disability, be denied access to, participation in, or the benefits of, any program or activity operated by the University. If requested, WOU will provide reasonable accommodation to applicants in order to provide access to the application, interviewing, and selection process. You are not required to note the presence of a disability on your application. If you require reasonable accommodation in the application and/or interview process due to disability, requests must be made in a timely manner. Please contact Human Resources at (503)838-8490.