| School                                  | W   | കുവട |
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## Appalachian Bible College

## Student Employment Application

| 1. | Name   |  |  |
|----|--|--|--|
| 2. | . Phone # where you can be reached prior to school starting  |  |  |
| 3. | Date of Birth  |  |  |
| 4. | Social Security # Sex: Male Female   |  |  |
| 5. | Are you a U. S. Citizen: Yes No  |  |  |
| 6. |  |  |  |
| 7. | List previous <b>Appalachian Bible College</b> work experience and your supervisor's name:   |  |  |
|    |  |  |  |
|    |  |  |  |
|    | st previous work experience with last 3 non-ABC employers. Include the name of the employer, dates employed, and a contact (name/phone number) and type of work:   |  |  |
|    |  |  |  |
|    |  |  |  |
| 8. | List any supervisory experience as well as the number of employees supervised:   |  |  |
|    |  |  |  |
|    |  |  |  |
| 8  | The following is a list of employment opportunities at Appalachian Bible College with over 30% in the Food Service or Custodial areas. Indicate your preference by entering a number in the blank (with 1 indicating your first preference): |  |  |
|    | Custodial Bookstore / Snackshop  |  |  |
|    | Food Service Maintenance / Lawn Care   |  |  |
|    | Office / Secretarial Library   |  |  |
|    | NO PREFERENCE  |  |  |
|    | .How many remaining semesters will you be at Appalachian Bible College?  |  |  |
|    | .Do you have any physical limitations that would limit or prohibit you from working in a specific area? If yes, please explain:  |  |  |
|    |  |  |  |

| 12. Do you have any skills or training that you think might benefit the college? If yes, please explain: |  |  |  |  |  |
|--|--|--|--|--|--|
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  | a-curricular activities that you plan to be involved in during the Be specific (e.g., soccer, basketball, chorale, etc.)   |  |  |  |  |
| a  | Dates  |  |  |  |  |
| b  | Dates  |  |  |  |  |
| C  | Dates  |  |  |  |  |
| 14. Please include your currer   | 14. Please include your current semester class schedule, if available.   |  |  |  |  |
| information concerning my previous employ  | ontained herein and the references and employers listed above to give you any and all yment and pertinent information that they may have, personal or otherwise, and release for any damage that may result from utilization of such information. I understand that onduct a background check. |  |  |  |  |
| Signed   | Date:  |  |  |  |  |
| Federal Work Study Pro   | ogram  |  |  |  |  |
|  | I am interested in the Federal Work-Study Program. This program is a Federal Student Aid Program and as such certain need based qualifications are required to be met.   |  |  |  |  |
| I understand that the F<br>part of the Federal Work<br>they may not be able to                           | inancial Aid Office will attempt to comply with my desire to be k Study Program. I further understand that for various reasons, do so.   |  |  |  |  |
| Signature:   | Date:  |  |  |  |  |
|  |  |  |  |  |  |
| ALL PAYROLL FORM   | S MUST BE COMPLETED BEFORE REPORTING TO WORK.  |  |  |  |  |
| • • • • • • • • • • • • • • • • • • •  | Il employment questions and completed applications   |  |  |  |  |