

Southeastern Illinois College Financial Aid Office 3575 College Rd. Harrisburg, IL 62946

Phone: (618) 252-5400 Fax: (618) 252-3062

Email: fao@sic.edu

Work Study Job Application

In lieu of completing the work study application, students may submit a typed resume with the complete information to the appropriate supervisor. If available, please provide a copy of your class schedule.

Name:			ID#:		
Address:			City	State	Zip
			•		1
Phone:		_ Email:			
Program of Study:			Anticipated Graduation Date:		
Work Study Position	Applying For:				
Do you have dependa	able transportation?	□ Yes □ No			
Available to begin w	ork:/	/			
Current or anticipated	d enrollment: 🗆 Full tim	ne 🗆 Part time			
Education:					
Military Service (if a	pplicable):				
Skills and Qualifica	tions:				
☐ TypingWP	M □ Data Entry	KSPH	\Box Co	ppier	
☐ Personal Computer	☐ Fax machin	ne		lculator	
☐ Microsoft Office (c	check all that apply)				
□ Word ® □ Ex	cel ®	□ PowerPoint (B □ Pu	blisher ®	
Other specific qualifi	cations pertaining to the	position:			

Employment History:
Begin with the most recent employment and list all jobs in reverse order. If additional space is needed, please attach a separate sheet.

Employer Name:	Supervisor's Name:
Address:	
Phone:	Employment Dates:
Job Duties and Responsibilities:	
Employer Name:	Supervisor's Name:
	<u>-</u>
	Employment Dates:
Job Duties and Responsibilities:	
References: Please provide at least two references:	
Name:	Title:
	Email:
Name:	Title:
Business/Organization:	
Phone:	Email:
	n you provided is true and accurate to the best of your knowledge. You are also ion or false information may result in denial of additional aid and possibly