



Student Employment Application

In its active commitment to building a diverse community, the Texas A&M System rejects discrimination on the basis of race, creed, color, religion, age, gender, disability, sexual orientation, national or ethnic origin, veteran's status, genetic information, or any other legally protected status in admission, employment or access to programs and activities. State law requires that you be informed that you are entitled to: (1) request to be informed about the information collected about yourself on this form (with a few exceptions as provided by law); (2) receive and review that information, and (3) have the information corrected at no charge. In compliance with the Americans with Disabilities Act (ADA), if accommodations are needed for the application process, please inform the Employment Office. All job offers are contingent upon the successful completion of a criminal background check.

All applications must include a resume and be submitted via e-mail to Danielle Sherman (dsherman@shs.tamu.edu).

Last Name:		First Name:		M.I.:	
Permanent Address:			Cell Phone:		
City:		State:		Zip:	
TAMU UIN (if applicable):		Please indicate which department you are interested in working:		Please indicate your availability to work the semester of which you are applying:	
What semester are you applying for?		<input type="checkbox"/> Business Office		Monday:	
When can you begin working?		<input type="checkbox"/> Cashier/Registration		Tuesday:	
What is your major?		<input type="checkbox"/> Laboratory		Wednesday:	
When is your expected graduation date?		<input type="checkbox"/> Marketing		Thursday:	
		<input type="checkbox"/> Nutrition Services		Friday:	
		<input type="checkbox"/> Patient Services			
		<input type="checkbox"/> Physical Therapy			
		<input type="checkbox"/> Radiology			

Education, Certifications, and References

Give the name and location of any current/previous colleges and/or universities attended:	List major and month/year of graduation:
Give the name of any certifications as they relate to the position you are applying:	Month & Year you were certified:
Please list two professional references:	Reference Phone Number:

By signing below, you certify that the above information listed is true and correct to the best of your knowledge.

Signature: _____ **Date:** _____