|  |  |
| --- | --- |
|  | Department of Residence Life & Housing |

# Central Office Student Assistant Application

## Applicant Information

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full Name: |  |  |  | Date: |  |
|  | Last | First | M.I. |  |  |

|  |  |  |
| --- | --- | --- |
| Home |  |  |
| Address: | Street Address | Apartment/Unit # |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | City | State | ZIP Code |
|  |  |  |  |
| Campus |  |  |
| Address: | Residence Hall | Room # |

|  |  |  |  |
| --- | --- | --- | --- |
| Phone: |  | University Email |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Date Available: |  | How many hours a week are you able to work? |  |

## Education

|  |  |
| --- | --- |
| College: |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Date of anticipated college graduation:  |  |  | Major: |  |

## Previous Employment

|  |  |  |  |
| --- | --- | --- | --- |
| Company: |  | Phone: |  |

|  |  |
| --- | --- |
| Job Title: |  |

|  |  |
| --- | --- |
| Responsibilities: |  |
|  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Company: |  | Phone: |  |

|  |  |
| --- | --- |
| Job Title: |  |

|  |  |
| --- | --- |
| Responsibilities: |  |
|  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Company: |  | Phone: |  |

|  |  |
| --- | --- |
| Job Title: |  |

|  |  |
| --- | --- |
| Responsibilities: |  |
|  |  |

## List below any specialized skills you possess that would make you successful in this position. (i.e. copier, fax machine)

|  |  |
| --- | --- |
|  |  |

## In your opinion, what makes you more qualified for this position than other applicants?

|  |  |
| --- | --- |
|  |  |

## Give an example of a situation in which you had to deal with an angry or upset customer, coworker, or classmate. How did you handle the situation and provide excellent customer service?

|  |  |
| --- | --- |
|  |  |

## Our office is open during school breaks and summer; you would be expected to work during these periods. Do you have a conflict with this arrangement? Yes or no? If yes, please explain.

|  |  |
| --- | --- |
|  |  |

**Please attach a copy of your class schedule when submitting this application.**

**Return this completed application to Ritchie Hall or email to housingga5@uakron.edu**