

## UNIVERSITY HOUSING DINING SERVICES STUDENT EMPLOYEE APPLICATION

Last name:		First name:							
Local mailing a	ddress:								
Phone:		E-mail address:							
Currently enro	lled: □ UO □ LCC	Other:							
Class: □ Fr	□So □Jr □Sr □Gr	Other:							
Are you author	rized for work study: ☐ Yes ☐ No								
Have you work	ed at the UO before: 🗆 Yes 🗆 No	If yes, list departments:							
WORK EXPE	FRIENCE								
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	EMPLOYER ADDRESS								
END DATE									
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Date available:	_ Un	Until:												
Available summers: ☐ Yes ☐ No							Max hours per week (student limit: 20)							
Preferred hours: ☐ Morning ☐ Afternoon														
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