

SIUE DINING SERVICES

Student Application

PLEASE PRINT LEGIBLY



Semester(s) Applying For _____

Date of Application _____

Name _____

Local Phone Number (____) _____ Cell Phone Number (____) _____

e-ID _____ Student ID _____

Campus Email Address _____@siue.edu

Campus Address _____ Home Address _____

Are you legally eligible for employment in this country?

- YES NO Newly Arrived International Student

Current Year in School (Check One):

- Freshman Sophomore Junior Senior Graduate Student

If you are a junior or senior, are you declared? YES NO Not Applicable

If you are a graduate student, do you have an assistantship? YES NO Not Applicable

What is your major in school? _____

Is your GPA 2.0 or higher?

- YES NO New Freshman Transfer Student Newly Arrived International Student

Are you currently employed at any other department on campus? YES NO

If yes, how many hours per week? _____ Department _____

Dates Employed: From _____ to _____
mm/yy mm/yy

Date Available for Work _____ How many hours are you wanting to work? _____

Please list the hours you are available to work each day: (Please attach a copy of your current semester *class schedule*.) **Applications that do not have this part filled out will not be considered!**

- Monday _____
- Tuesday _____
- Wednesday _____
- Thursday _____
- Friday _____
- Saturday _____
- Sunday _____

Employment History

Employer _____ From _____ to _____

Immediate Supervisor _____ Phone # (____) _____

Job Title _____

Reason for Leaving _____

Employer _____ From _____ to _____

Immediate Supervisor _____ Phone # (____) _____

Job Title _____

Reason for Leaving _____

Have you ever been employed by SIUE Dining Services? YES NO

If yes, what dates were you employed? From _____ to _____

If yes, who was your supervisor? _____ Department _____

Why do you want to work in Dining Services?

What do you feel are some of your strengths?

Please describe in your own words what it means to have a good customer service experience.

I give SIUE Dining Services the right to investigate and to secure additional job-related information. I hereby release SIUE Dining Services and its representatives from liability for seeking such information. Furthermore, I release all other persons, corporations, or organizations for providing such information.

YES NO

Applicant Signature _____ Date _____

It is understood and agreed upon that I will be required to attend workplace orientation at a future date as designated by SIUE Dining Services Student Personnel.

Applicant Signature _____ Date _____

This application is current only for 60 days. At the conclusion of this time, it will be necessary to fill out a new application if I have not heard from SIUE Dining Services and still wish to be considered for employment.

Applicant Signature _____ Date _____

Please take into account that employment with Dining Services is not a guarantee. Just because you apply does not mean your availability meets what Dining Services needs.

Thanks for your interest!