

Undergraduate Student Employment Application Engineering Design and Professional Programs

Name _____ Date _____

Campus Address _____

Campus Telephone # _____

Major _____ Anticipated Graduation Date _____ (semester/year)

E-mail Address: _____ Student ID # _____

- Applying for an EDSGN position? Yes No (If yes, complete parts A, B, & C and submit this form with a copy of your resume and class schedule for the applicable semester as indicated below).

- **ALL APPLICANTS: Please submit this form to Janie Burns, 213 Hammond, 863-1559.**

(A) Applicants for Lab Assistant or Grader positions only fill out section below:

Which EDSGN course did you take? _____ Instructor _____

Which semester / year did you take the EDSGN course? _____

How long do you plan to work as an EDSGN TA? _____ (semester/year)

Which lab would you like to work in? Computer _____ Hands-on Design _____ Both _____

Would you be interested in working with computer hardware? Yes _____ No _____

Would you be interested in setting up engineering experiments? Yes _____ No _____

Have you worked in this department before? Yes _____ How long? _____ No _____

(B) Applicants for Computer Administrator position only fill out section below:

Would you be interested in maintaining a computer network? Yes _____ No _____

What software are you familiar with? _____

(C) Faculty Recommendation:

This student successfully complete EDSGN 100 and I recommend him/her as a lab assistant:


Student Name: _____

School of Engineering Design, Technology and Professional Programs – HIRING FORM

NOTE: All sections must be completed by supervisor before hiring can be processed.


Supervisor:

Job Title:	Job Description:	
Suggested Wage:	Semesters Employed:	Start Date:
Area of Employment/Project:	Supervisor:	
Expected Hours / Week: _____ Not to exceed _____ Hours / Week.		
Budget / Fund: _____ Cost Center: _____		
Comments:		

 Signature _____ Date _____

Administrative Assistant:

Approved:	Wage rate:
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 Signature _____ Date _____

Financial Assistant:

Initials:	Form Submitted Date:	Budget/Fund/Cost Center:
	Payroll Processed Date:	Payroll/Student Notification Date:
	Position Number:	Termination Date:
Comments:		

 Signature _____ Date _____