

UNIVERSITY COMMUNICATIONS

STUDENT APPLICATION 2019-2020

General Candidate Information: (please print clearly)

Last Name: _____ First Name: _____ M.I.: _____
ID#: _____ Campus Residence (hall/fraternity/SLU): _____
HWCC Box: _____ Email: _____
Cell: _____ Do you accept text messages? Yes or No (circle)
Class: _____ Transfer Student? Yes or No (circle)
Cumulative G.P.A.: _____ Major(s): _____

Do you have work-study funds? Yes or No (circle)

If yes, indicate the dollar amount awarded for the year: \$ _____

Do you have another job on or off campus? Yes or No (circle)

If yes, please list where, number of hours per week, and your supervisor's name: _____

Between the hours of 9 a.m.–10 p.m., **please list the hours you ARE ABLE/WILLING to work during the 2019-2020 academic year** on each of the days listed below:

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

Name of position: _____

Please list skills and experience for position below: _____

In the past, have you served/worked in any of the following positions?

Student Writer	Yes or No If yes, what year(s)? _____
Student Photographer	Yes or No If yes, what year(s)? _____
Student Designer/Videographer	Yes or No If yes, what year(s)? _____
Student Assistant for Sports Information	Yes or No If yes, what year(s)? _____

References:

Please list two OWU references; these may be professors, coaches, advisors, admission counselors, etc.

Name of Reference #1:

Relationship to Applicant: _____

Phone #: _____

Email: _____

Name of Reference #2:

Relationship to Applicant: _____

Phone #: _____

Email: _____

Please legibly write a short answer as to why you'd like to work for the Office of University Communications: _____

Please list all clubs, sports, organizations, fraternities, sororities, and other extra-curricular activities you are involved in or plan to be involved in during this academic year. If you have set meeting/practice dates for your extracurriculars, please provide those dates/times below:

Applications due to the Office of University Communications at 4 Williams Dr. (ground floor) or emailed to unicomm@owu.edu.

I certify that the information provided on this application is true and complete to the best of my knowledge. I have read and fully understand the position descriptions and I am able to comply with all training requirements and position responsibilities. I authorize the Office of University Communications to verify my credentials, including academic qualifications, judicial record, and any other publicly accessible information.

Applicant Signature

Date