

8400 Burr Street Crown Point, IN 46307 219-365-4031

On-Campus Employment Application

Name						
(Please Print) Last	First	Middle				
Address						
City	StateZip	Birthday				
Home Phone Number ()Ag	geGender	Dia an Diatona Hana			
Cell Phone Number () Social	Security #	Place Picture Here			
E-mail	Date you plan to enter o	college: Fall /Spring 20				
Anticipated: Major_	Minor					
Employment History	<u>:</u>					
Most Recent Employment						
Company's Name		Phone Number				
Address						
Supervisor's Name		Your Position/Title				
First Day of Employment_		Last Day of Employment				
Responsibilities:						
Reason for Leaving Emplo	yment					
Other Employment						
Company's Name		Phone Number				
Address						
Supervisor's Name		Your Position/Title				
First Day of Employment_	Last Day of Employment					
Responsibilities:						
Reason for Leaving Emplo	yment					
Work Skills: Please pla	ace a ✓ by any of the skills listed l	below that you possess.				
1. Computer Skills PowerPoint Microsoft Word Adobe Creative Suite Audio Editing Photo Shop 2. Media Photography Audio-Visual Video Equipment Video Editing	3. Healthcare Nursing CNA 4. General Skills Child Care Cashier Food Service Maintenance Janitor	5. Music Pianist Instrument 6. Trade Skills Computer Repair Marketing Mechanic Construction Drywall Electrical Framing	Cabinetry HVAC			

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We recognize that many students struggle with challenges that are unique to them. Unfortunately, no financial application

This application must be turned in with a financial assessment form or your application will be removed from consideration for on-campus employment.

DATE

APPLICANT'S SIGNATURE

Send completed application and financial assessment to:
Hyles-Anderson College Business Office
C/O Jeremy Maulucci
8400 Burr Street
Crown Point, IN 46307