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Application for Work Student and Student Employment

STUDENT NAME:

_____ Last First M.I.

SOCIAL SECURITY NUMBER: _____ DATE OF BIRTH: _____ / _____ / _____
Month Day Year

HOME ADDRESS: _____ CITY: _____ STATE: _____ ZIP CODE: _____

HOME PHONE: (_____) _____ CELL PHONE: (_____) _____

EMAIL ADDRESS: _____ RESIDENT OR COMMUTER: _____

MAJOR: _____ FULL TIME OR PART TIME: _____

WORK EXPERIENCE:

EMPLOYER: _____ DATES OF EMPLOYMENT: _____

RESPONSIBILITIES: _____

EMPLOYER: _____ DATES OF EMPLOYMENT: _____

RESPONSIBILITIES: _____

SKILLS:

CHECK EACH SKILL BELOW THAT MATCHES YOUR EXPERIENCE:

- | | |
|---|---|
| <input type="checkbox"/> PHONES | <input type="checkbox"/> CUSTOMER SERVICE |
| <input type="checkbox"/> FILING | <input type="checkbox"/> MEDIA EQUIPMENT |
| <input type="checkbox"/> TUTOR | <input type="checkbox"/> TECHNICIAN |
| <input type="checkbox"/> READER (AMERICA READS PROGRAM) | <input type="checkbox"/> ORAL/WRITTEN COMMUNICATION |
| <input type="checkbox"/> MATH (AMERICA COUNTS PROGRAM) | <input type="checkbox"/> MICROSOFT OFFICE |
| <input type="checkbox"/> DATA ENTRY | <input type="checkbox"/> MICROSOFT POWERPOINT |
| <input type="checkbox"/> WORD PROCESSING | <input type="checkbox"/> MICROSOFT EXCEL |
| <input type="checkbox"/> BOOKEEPING | <input type="checkbox"/> MICROSOFT WORD |
| <input type="checkbox"/> ORGANIZATIONAL SKILLS | <input type="checkbox"/> MICROSOFT ACCESS |
| <input type="checkbox"/> RESEARCH | <input type="checkbox"/> INTERNET |

ADDITIONAL SKILLS: _____

INDICATE TIMES AVAILABLE FOR WORK:

MONDAY: _____ TUESDAY: _____ WEDNESDAY: _____ THURSDAY: _____

FRIDAY: _____ SATURDAY: _____ SUNDAY: _____ UNSURE/NOT KNOWN: _____

COMMUNITY SERVICE

ARE YOU INTERESTED IN COMMUNITY SERVICE EMPLOYMENT OPPORTUNITIES? _____ YES _____ NO

I HEREBY CERTIFY THAT ALL STATEMENTS AND INFORMATION PROVIDED IN THIS APPLICATION ARE TRUE TO THE BEST OF MY KNOWLEDGE AND THAT I WILL USE THE PROCEEDS AWARDED FOR COLLEGE RELATED EXPENSES.

STUDENT SIGNATURE: _____ DATE: _____