



Department of Residential Facilities  
 Facilities Student Employment Office  
 1205E Leonardtown Service Building  
 College Park, MD 20742  
 (301) 314-3486

**APPLICATION FOR STUDENT EMPLOYMENT**

This application will remain active for the entire academic year, including the summer provided that you, the applicant, revise your schedule each time it changes. A new application must be submitted at the beginning of each academic year.

DATE OF APPLICATION: \_\_\_\_\_ Semester(s) Plan to Work:  Fall  Spring  Summer  Year round  
 (Please select all that apply)

NAME: \_\_\_\_\_

LOCAL CAMPUS ADDRESS: \_\_\_\_\_

Local Phone \_\_\_\_\_ Cell Phone: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

PERMANENT ADDRESS: \_\_\_\_\_

Home Phone \_\_\_\_\_

ACADEMIC STATUS: (select one)  High School  FR  SO  JR  SR  GR

ACADEMIC MAJOR: \_\_\_\_\_ Estimated Date of Graduation: \_\_\_\_\_

**How did you hear about the position(s) or the Facilities Student Employment Office?**

(Select all that apply)

- Job Fair
- You worked for Facilities before
- Flier/Poster
- Friend
- Mailing
- University Staff
- Diamondback ads
- Internet Job Referral/Career Center
- UM Shuttle
- Ritchie Marquee
- Other (specify) \_\_\_\_\_

**POSITION APPLIED FOR:**

- Inventory Crew
- Service Center Staff (**requires evening, night, & weekend hours (all others require time during University office hours: 7:30-4:00, Mon-Fri)**)
- Other (specify) \_\_\_\_\_

**Summer Applicants:**

**Do not complete this section if you are applying for only Fall and/or Spring positions**

- Are you applying for full-time or part time employment?  Full Time  Part Time
- If hired, would you plan to live on campus?  Yes  No
- Are you available to work the entire summer?  Yes  No
- Do you plan to enroll in any summer session classes?  Yes  No
- If yes, how many credits? \_\_\_\_\_ When are classes?  Day  Evening

**EMPLOYMENT HISTORY**

Have you worked for Residential Facilities before?  Yes  No

If so list the sections and the dates you worked: \_\_\_\_\_

**PREVIOUS EMPLOYMENT RECORD:**

Please list the previous employment experiences beginning with the most recent.

Position: \_\_\_\_\_ Employment Dates: \_\_\_\_\_

Employer Name: \_\_\_\_\_ Supervisor's Name & Phone: \_\_\_\_\_

Type of Duties and Responsibilities: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Position: \_\_\_\_\_ Employment Dates: \_\_\_\_\_

Employer Name: \_\_\_\_\_ Supervisor's Name & Phone: \_\_\_\_\_

Type of Duties and Responsibilities: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Position: \_\_\_\_\_ Employment Dates: \_\_\_\_\_

Employer Name: \_\_\_\_\_ Supervisor's Name & Phone: \_\_\_\_\_

Type of Duties and Responsibilities: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Position: \_\_\_\_\_ Employment Dates: \_\_\_\_\_

Employer Name: \_\_\_\_\_ Supervisor's Name & Phone: \_\_\_\_\_

Type of Duties and Responsibilities: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**SPECIAL SKILLS:**

Do you have a valid driver's license?  Yes  No What State: \_\_\_\_\_

Describe any special skills you may have, such as artistic, clerical, computer, communication, mechanical, organizational, etc

**I certify that all information provided on this application is true to the best of my knowledge. I further understand that furnishing false information could lead to termination of employment.**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**