Application for Employment Event Technical Services Production Technician Salisbury University (410) 548-4597

Name:	Date:
Student ID Number:	Current GPA:
Local Address:	
Permanent Address:	
Cell Phone Number: ()	Student Email:
Class Status: FreshmanSopho	omoreJuniorSenior
How many credit hours are you pursuing this	semester?
Expected Graduation Date:	
	nent (Check all that apply):Audio/Visual Experience Other (Please explain)
List two previous work references:	
Employer Name: Position: Phone Number: Job Description:	
Employer Name:Position:	
Phone Number:	
Job Description:	

Days and hours available to work:							
(Semester)							
PLEASE INDICATE THW HOURS YOU ARE AVALABLE TO WORK EVERYDAY							
MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	

Sign:	Date:
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