



MARQUETTE UNIVERSITY

Raynor Memorial Libraries

Access Services Job Application

For Semester _____

Today's Date _____

Name _____
Last First M.I.

Local Address _____

City State Zip Phone

Email Address _____ Cell Phone _____

Permanent Address _____

City State Zip Phone

Emergency Contact _____
Name Relationship Phone

Year in School Freshman Sophomore Junior Senior Graduate

Major _____ Projected Graduation Date: _____

I am enrolled in _____ credit hours. I would like to work _____ hours per week.

EMPLOYMENT HISTORY

(most recent first)

1. EMPLOYER _____ POSITION _____

DUTIES _____

_____ FROM _____ TO _____

SUPERVISOR _____ PHONE _____

2. EMPLOYER _____ POSITION _____

DUTIES _____

_____ FROM _____ TO _____

SUPERVISOR _____ PHONE _____

Do you have customer service experience? _____ If yes, describe:

Have you previously worked on campus, yes or no? _____

Are you familiar with the Library of Congress System, yes or no? _____

Do you know anyone currently employed at Raynor Memorial Libraries? (Please list) _____

Please write in your class schedule and any other commitments that would prevent you from working (clubs, sports, volunteer activities, etc). If hired, hours are assigned based on your listed availability.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
7:45-9:00							
9-10							
10-11							
11-12 (noon)							
12-1							
1-2							
2-3							
3-4							
4-5							
5-6							
6-7							
7-8							
8-9							
9-10							
10-11							
11-12 (midnight)							

For Office Use Only:

Contacted: _____

Interview Date: _____ Time: _____