

Marion Technical College

Student Employment Application

Please mark your interest: **On Campus** **Community Service** **Tutoring**

Name: _____ Date: _____

Address: _____

City/State: _____ MTC ID last 4 digits: _____

MTC Graduation Date: _____ MTC Grade Point Average: _____

Phone: _____ E-mail Address: _____

Skills and/or experience:

Site: _____ Supervisor: _____ Phone: _____

Number of hours you would like to work per week: _____

Times of day you are usually available to work: _____

Type of work desired: _____

You may attach a resume or use the back of this sheet to provide further information.

In order to qualify for working on campus, you must complete and submit the results of the Free Application For Federal Student Aid and comply with the MTC Student Employee Guidelines.

_____ **For Office Use Only** _____

Date

Referred to

Results

Supervisor

Eligible for Work-Study? _____

Amount? _____