## UIC STUDENT DEVELOPMENT SERVICES

Positions Application

INSTRUCTIONS: Please print or type all information clearly and legibly. Completed applications must be submitted <u>electronically</u> to orhelp@uic.edu. For efficient communication, you are asked to have an active e-mail account in which to receive additional information throughout the process. Lastly, please submit an electronic copy of your resume.

Are you authorized to work in the United States of <b>Please note:</b> If hired, documentation and a valid States of the states of th	f America?      Y    /     N Social Security Number will be needed. ( <i>a list of ac</i>	cceptable documentation will be provid
	se include dates):	
	Anticipated Graduation Date:_	
•		
	College:	
Number and Street	City, State	Zip Code
Local Address:		
Permanent Address:Number and Street	City, State	Zip Code
E-mail:		
Local Phone:	Permanent Phone:	
University Identification No. (blue I-card number):		
Name:Last	First	Middle
PERSONAL DATA  Name:		
	Senior Orientation Leader	Business Associate
X Orientation Leader		

been involved through the present time and describe	nonor societies, community services or volunteer experiences with which you have e your level of participation. (Use an additional sheet, if necessary).
PERSONAL STATEMENT	
Why do you want to work for Student Development S	Services? (Use an additional sheet, if necessary).
Please describe one leadership opportunity you've h additional sheet, if necessary).	ad that prepared you for a position with Student Development Services. (Use an
you well enough to write of your skills, abilities and e <b>form.</b> Please have you references to submit their red Harrison, Suite 1600 Student Services Building,	eference forms. Deliver one of your reference forms to a non-relative who knows experiences. A UIC faculty/staff member must complete the other reference commendations directly to Student Development Services, 1200 West M/C 320, Chicago, IL 60607, FAX 312-996-3101. If you choose to handion, please instruct you reference to place said form into a marked envelope eferences' name and telephone number.
Name:	Phone:
	Phone:Phone:
Name:	Phone: Development Services permission to verify my records for academic, disciplinary