

Animal Science Department Student Employment Application

Name: _____

Address: _____

Phone: _____

EDUCATION

College Major _____ Minor _____

Advisor _____ Year in School _____

Expected Graduation Date _____

WORK EXPERIENCE

Dates Employed	Employer	Supervisor
Skills/abilities		

OTHER

Registered with Scholarship & Financial Aid Yes No

Awarded Work-study Yes No

Desired Employment Full-time Part-time (hrs/week ____)

Desired Work Location (circle one) Lincoln Mead

Areas of interest(s)

Clerical Livestock Meats slaughter & processing Research

REFERENCES

Name _____ Phone _____

Name _____ Phone _____

I certify that this information is correct, and authorize references and employers to release information to UNL employees.

Signature _____ Today's Date _____

Please complete and indicate time(s) able to work.

Semester _____

Hours	Monday	Tuesday	Wednesday	Thursday	Friday
7:00					
8:00					
9:00					
10:00					
11:00					
12:00					
1:00					
2:00					
3:00					
4:00					
5:00					

Return to:

**Carrie Adams
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