

**MTSU FARM LABORATORIES
STUDENT WORKER APPLICATION
Submit Completed Application to SAG 100**

DATE: _____

NAME: _____ M# _____

TELEPHONE NUMBER (LOCAL): _____

CELL: _____

EMAIL: _____

ADDRESS (LOCAL): _____

CITY, STATE AND ZIP: _____

Classification (circle one): Senior Junior Sophomore Freshman

Major: _____ GPA: _____

How many hours are you taking this semester? _____

Are you on the work study program? Y N Circle one 5 hr or 15 hr

Do you have reliable transportation? Y N

Do you have a valid TN drivers license? Y N

Do you have a valid SS card? Y N

[note: students must provide driver's license, original social security card and voided bank check, or routing and account numbers, if hired and added to payroll]

List your work experience.

List any equipment you have experience in
operating: _____

Are you available to work nights and weekends as needed? _____

How many hours a week are you seeking? _____

What hours are you available to work?

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

Sunday

REFERENCES:

Please give Name, Address, and Telephone Number of 3 work references:

1. _____

2. _____

3. _____

In case of emergency, who should be notified:

Name: _____ Relationship: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____

Area of interest: Please rank your 1st and 2nd preference ONLY

- _____ Dairy Unit
- _____ Milk Processing
- _____ Crop Unit
- _____ Beef/Swine Unit
- _____ Garden/ Student Farmers Market