

BISMARCK STATE COLLEGE COMPUTER LAB MONITOR APPLICATION FORM

Please complete the four sections of this application and return it to the Sykes Student Success Center located in Jack Science Center room 312. Incomplete applications will not be considered.

Section 1: Personal Information

Name: _____ Date: _____

BSC E-mail Address: _____ BSC ID#: _____

Are you eligible for Federal Work Study support? Yes _____ No _____

Can you submit verification of your legal right to work in the U.S.? Yes _____ No _____

Local Contact Information (address while attending Bismarck State College)

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Cell Phone: _____

Permanent Contact Information (parent's or home address if different from above)

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Cell Phone: _____

Education

Major: _____

Year: ___ Freshman ___ Sophomore ___ Collaborative Student (Dickinson State, Minot State) ___ Other

Expected Graduation Date: _____

Cumulative GPA: _____

Work Availability:

	Sun	Mon	Tue	Wed	Thu	Fri	Sat
07:30							
08:00							
08:30							
09:00							
09:30							
10:00							
10:30							
11:00							
11:30							
12:00							
12:30							
1:00							
1:30							
2:00							
2:30							
3:00							
3:30							
4:00							
4:30							
5:00							
5:30							
6:00							
6:30							
7:00							
7:30							
8:00							
8:30							
9:00							
9:30							
10:00							
10:30							
11:00							

Please cross out any hours which you **cannot** work for any reason (class, meals, other employment commitments, etc).

Semester or period covered	Circle One:	Year:
	Fall	
	Spring	
	Summer	

Date when you would be able to start work:	
--	--

How many hours per week would you prefer to work?	
---	--

How many hours per week do you need to work?	
--	--

How many hours per week is the most you can work?	
---	--

The labs are open as follows:
 Monday-Thursday; 7:30 a.m.-11:30 p.m.
 Fridays: 7:30 a.m.-3:45 p.m.
 Sundays: 4:00-8:00 p.m. (this may change)
 List any shifts you prefer to work:

Section 2: Questionnaire

1. Have you ever been employed by BSC? If yes, list the department, supervisor, and position.

2. Based on your own experience and understanding, what does customer service mean to you?

Section 3: Technology Skills Self Assessment

Please assess your skill or familiarity with the following technology areas. Rate your skill on a scale from 0 (no experience) to 5 (lots and lots of experience).

[0: Not familiar at all, 1: Vaguely familiar, 2: Fairly proficient, 3: Proficient 4: Very good proficiency, 5: Excellent proficiency.]

Note: Lack of familiarity with listed software is **not** grounds for non-consideration

	0	1	2	3	4	5
Word	0	1	2	3	4	5
Excel	0	1	2	3	4	5
PowerPoint	0	1	2	3	4	5
Access	0	1	2	3	4	5
Publisher	0	1	2	3	4	5
Java	0	1	2	3	4	5
Visual Basic	0	1	2	3	4	5
C++	0	1	2	3	4	5
Windows Operating System	0	1	2	3	4	5
Other	0	1	2	3	4	5

Section 4: Agreement

I hereby certify that all answers herein are true to the best of my knowledge. I further understand that all statements made may be investigated and verified in the course of considering this application. Should I become employed, I understand that false or misleading information may be the basis for immediate discharge as well as grounds for withdrawal of an offer of employment. I also understand that a criminal history record check will be completed if I am considered a candidate for this position.

Signature

Date

Mailing Address:

Lonna Meier, Coordinator
Academic Support Services
Bismarck State College
PO Box 5587
Bismarck, ND 58506-5587

Phone: 701- 224-5671

Email: Lonna.Meier@bsc.nodak.edu