

WAA Student Employment Application



Last Name (please print) First Name (please print)

Home Phone Cell Phone

Address (please print) City Zip Code

Email (required, please print)

Birth Date Age Grade

1.	Type of Employment Applying for: (See Reverse for Job Descriptions)
	FIELDS OFFICE STORAGE ROOM ALL

2.	Previous Work Experience.
----	----------------------------------

3.	Circle Time of day you are available.
	MORNING AFTERNOON AFTER SCHOOL EVENING

4.	Circle Days available.
	MONDAY TUESDAY WENDESDAY THURSDAY FRIDAY SATURDAY SUNDAY

REFERENCES

1. Name _____ Relationship _____

Company _____ Phone Number _____

Address _____

2. Name _____ Relationship _____

Company _____ Phone Number _____

Address _____

3. Name _____ Relationship _____

Company _____ Phone Number _____

Address _____

Parent Signature (if age 16 or under) Date

Return completed application to: **WAA**
 2323 Liberty Street
 Aurora, IL 60502