

Hope College Upward Bound
Office Assistant

APPLICATION

Name: _____

Permanent Address: _____ Phone #: _____

Local Address: _____ Phone #: _____

Social Security #: _____ Birthday: _____

Student Status: (circle one) freshman sophomore junior senior

G.P.A. _____ Major: _____ Minor: _____

Office/clerical Experience: _____

Extracurricular activities: _____

Hobbies/interests: _____

Work Experience:

<u>Date</u>	<u>Position</u>	<u>Duties</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Personal References:

<u>Name</u>	<u>Address</u>	<u>Phone #</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Are you presently receiving financial aid under the Work Study Program? Yes _____ No _____

When would you be available to work? _____

Signature: _____ Date: _____