

STUDENT APPLICATION

Semester _____

Child Development Labs, 843 Bolton Road, Unit 1117, Storrs, CT 06269
 Phone: 860-486-2865 Fax: 860-486-5278

NAME _____ What is your major? _____

E-mail Address _____ What semester are you in? _____

Phone # _____ Work Study ____ Student Labor ____

If there are no classroom positions, are you interested in the possibility of office work? ____yes ____no

How many hours would you like to work each week? _____

What is the maximum number of hours you will commit to working each week? _____

Do you have Infant/Child CPR and first aid training? _____
 (Please attach copy of both sides of your certification card)

Please attach your printed course schedule from Peoplesoft. You must be available every Wednesday from 3:35-4:25 for training sessions in order to be considered for employment. Scheduling is based upon classroom needs. If your schedule changes, notify me as soon as possible. You can reach me at janice.boltseridge@uconn.edu or (860) 486-2865. **If selected, you will receive your work schedule via e-mail.**

AVAILABILITY

(Please circle ALL shifts you are available to work. You must have **AT LEAST** two shifts on different days)

| <u>Monday</u> | <u>Tuesday</u> | <u>Wednesday</u> | <u>Thursday</u> | <u>Friday</u> |
|-----------------|------------------|---|------------------|------------------|
| 7:30am-11:00am | 7:30am – 11:00am | 7:30am – 11:00am | 7:30am – 11:00am | 7:30am – 11:00am |
| 11:00am-2:30pm | 11:00am – 2:30pm | 11:00am – 2:30pm MANDATORY TRAINING 3:35pm – 4:25pm | 11:00am – 2:30pm | 11:00am – 2:30pm |
| 2:30pm – 5:30pm | 2:30pm – 5:30pm | 2:30pm – 5:30pm | 2:30pm – 5:30pm | 2:30pm – 5:30pm |

New applicants: Briefly describe your experiences with young children ages 6 weeks through 5 years of age.

Additional Comments: