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STUDENT EMPLOYMENT APPLICATION

Please complete and return to the NHVDL

Today's Date:					
Name:			Email address:		
Phone:	e: Major:		tion (mm/yy):	Advisor:	
Class: FR SO JR	SR Non-Tradit	ional Do yo	our have work study?	Y N (not required	d for employment)
Semester you are ap	nlving for: Spring	Fall Are vo	ou Rabies vaccinated?	Y N When com	ipleted?
Are you available du					
		Sullillel 7 le	Till Spillig bleak	None	
Current/Previous			Desiries de del	0	N
Dates Employer		er	Position held	Supervisor Name	
UNH laboratory co	ourses completed				
	•				
Work availability (place an 'X' in the t	ime slots <u>YOU ARE</u> a	available to work)		
	Monday	Tuesday	Wednesday	Thursday	Friday
8:00-8:30					
8:30-9:00					
9:00-9:30					
9:30-10:00					
10:00-10:30					
10:30-11:00					
11:00-11:30 11:30-12:00					
12:00-12:30					
12:30-1:00					
1:00-1:30					
1:30-2:00					
2:00-2:30					
2:30-3:00					
3:00-3:30					
3:30-4:00					
4:00-4:30					

NOTE: Those applications received prior to the start of the semester will receive first