

Department of Communication Sciences and Disorders & Maryjane Rees Language Speech and Hearing Center

Student Employee Supplemental Application

Name: _____ Student ID: _____ Sac State email: _____

Sac State Program of Study/Major: _____ Classification (Undergrad or PostBacc): _____

Semester and Year for which you are applying: _____

Schedule Availability:

(Please indicate availability by typing Yes in the day/time slots you are available to work. Leave all other times blank)

	Monday	Tuesday	Wednesday	Thursday	Friday
8:00 AM to 9:00 AM					
9:00 AM to 10:00 AM					
10:00 AM to 11:00 AM					
11:00 AM to 12:00 PM					
12:00 PM to 1:00 PM					
1:00 PM to 2:00 PM					
2:00 PM to 3:00 PM					
3:00 PM to 4:00 PM					
4:00 PM to 5:00 PM					
5:00 PM to 6:00 PM					
6:00 PM to 7:00 PM					
7:00 PM to 8:00 PM					

Minimum number of hours per week needed to work: _____ Preferred number of hours per week (cannot exceed 16): _____

Additional scheduling notes: