

Class Schedule for Fall Spring (please specify):

Monday	Tuesday	Wednesday	Thursday	Friday

Availability to Work in Office (Please specify the hours you are available to work below):

	From:	To:
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

Are you available to work during the winter break? _____

Are you available to work during the spring break? _____

Professional References

Please give the name, position/title, and current telephone number of three supervisors who have knowledge of your character, experience and ability (no relatives or friends).

Name:	Position/Title:	Telephone#
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Please read the following before signing:

Springfield College is committed to enhancing diversity and equity in education and employment. To that end, the College welcomes candidates from all backgrounds and lived experiences, who will contribute to a culture of inclusion and respect. For more information about Springfield College's position on diversity and inclusion, please visit our Office of Campus Life & Inclusion.

The statements in this application are true, correct and complete. I understand any misrepresentation or omission of information on this application shall be considered sufficient reason for withdrawal of an offer or subsequent termination of employment.

I authorize investigation of all the statements herein and release Springfield College and all others from liability in connection with the same.

I hereby authorize Springfield College to contact stated references and or current and previous listed employers.

All employment is subject to semester review and/or ongoing satisfactory performance.

By signing this application, I am verifying that the information provided is true and correct to the best of my knowledge.

Signature: _____ **Date:** _____