

**Four Corners Upward Bound Math & Science
Office Clerk Position
Partime Position: Start Immediately
and end on July 14th
12:30 – 4:30 M – F
\$5.75per hour**

Application Deadline: Open Until Filled

Job Description:

The Student Office Assistant at the Four Corners Upward Bound Math & Science Program (Four Corners) will work 20 hours a week (12:30-4:30 Monday-Friday) and is a key player in office and program functions. Student Worker responsibilities include both basic office operations – such as collecting attendance from classrooms for high school summer academy, computer work, filing, copying, mailings – as well as program support, relaying messages between classrooms the residence hall, and office staff, researching and tracking information and working on some projects independently. We are looking for someone who enjoys working with people and students. The applicant must be friendly, responsible, organized and self-motivated. For more information about our program see our website at <http://www.nau.edu/ubms>.

Minimum Qualifications:

- Minimum cumulative GPA=2.0

How To Apply:

- Complete the Application below

How To Turn In Your Application:

In Person: Bring your application to the Educational Support Program Offices during regular working hours and prior to the end of the work day (7:30-3:30 Monday-Friday). Put it in Terry Hubbard's mailbox.

The Educational Support Programs Office is located on the second floor of the University Union above the Fieldhouse in room 240.

OR

Via FAX 523-9466: If faxing you may call your social security number into 523-1315 instead of writing it on the application. Please be sure to state your name and social security number slowly and clearly.

Do You Have A Question?

- E-mail Terry.Hubbard@nau.edu or call 523-1315 and leave a voice message with the best time to reach you and your phone number and the reason you are calling.

Four Corners Student Application

NAU Contact Information:

Last name, First Name	Employee ID (Social Security Number If no Emp ID)
Local Address	Phone
City, State, Zip	E-mail

Permanent Contact Information:

Last name, First Name	Phone
Local Address	
City, State, Zip	

Part of this job requires driving a full-size van. Have you completed NAU's van training?

YES NO

(include a copy of your current van training card if you have.)

Van training is based on a 4 hour class with videos, no behind the wheel training unless requested. What experience do you have driving and parking large vehicles?

If you have not completed van training call 523-2469 and determine the dates you can enroll in van training. Date you will take van training _____ (required if hired).

Date you will take behind the wheel training _____ (suggested but not required).

Student Information:

Current Class: __ Freshmen __ Sophomore __ Junior __ Senior	Major/Minor	Cumulative GPA
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Employment/Volunteer Record: Starting with your present or most recent employer/volunteer supervisor, please list all previous paid/volunteer positions. Please include any NAU experience.

Name of Company	Type of Business	Job Title
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Address		Description of Job Responsibilities
City, State, Zip		
Name of Supervisor	Phone	
May we contact your supervisor as a reference? <input type="checkbox"/> yes <input type="checkbox"/> no		
Salary	Dates Worked: From To	
Reasons for Leaving		

(Employment record continued.)

Name of Company	Type of Business	Job Title
Address		Description of Job Responsibilities
City, State, Zip		
Name of Supervisor	Phone	
May we contact your supervisor as a reference? <input type="checkbox"/> yes <input type="checkbox"/> no		
Salary	Dates Worked: From To	
Reasons for Leaving		

Name of Company	Type of Business	Job Title
Address		Description of Job Responsibilities
City, State, Zip		
Name of Supervisor	Phone	
May we contact your supervisor as a reference? <input type="checkbox"/> yes <input type="checkbox"/> no		
Salary	Dates Worked: From To	
Reasons for Leaving		

Name of Company	Type of Business	Job Title
Address		Description of Job Responsibilities
City, State, Zip		

Name of Supervisor	Phone	
May we contact your supervisor as a reference? ___ yes ___ no		
Salary	Dates Worked: From To	
Reasons for Leaving		

(Employment record continued.)

Name of Company	Type of Business	Job Title
Address		Description of Job Responsibilities
City, State, Zip		
Name of Supervisor	Phone	
May we contact your supervisor as a reference? ___ yes ___ no		
Salary	Dates Worked: From To	
Reasons for Leaving		

Name of Company	Type of Business	Job Title
Address		Description of Job Responsibilities
City, State, Zip		
Name of Supervisor	Phone	
May we contact your supervisor as a reference? ___ yes ___ no		
Salary	Dates Worked: From To	
Reasons for Leaving		

Please read and sign below:

An Equal Opportunity Employer:

We are an equal opportunity employer, and we do not and will not discriminate on the basis of race, religion, national origin, sex, age, handicap, marital, or veteran status. Information provided on this application is confidential and used for the sole purpose of employment eligibility.

I hereby certify that the information on this application is true and correct, and I understand that any misrepresentation or omission of facts on my part will be justification for dismissal from the department's service, if employed. I understand that this job requires punctuality, reliability in attendance, and confidentiality. Breaches of confidentiality will be cause for immediate dismissal. I will notify my supervisor in advance if I will be late or cannot work so arrangements can be made for coverage of my responsibilities. In addition, I am aware that continued employment is dependent on performance and availability of funds.

Student Signature

Date

Four Corners Office Clerk Application

Short Answer & Essay

1. What are a few important skills to have at the workplace? How do handle stress in an office setting? _____

2. Tell us about your computer skills and experience (List software strengths and weaknesses): _____

3. We need a student worker who is self-motivated. Describe a project you worked on independently while at another job or volunteer position. What did you like about working independently and what was challenging? _____

4. What experiences have you had working with diverse groups of people? _____

EMPLOYMENT BACKGROUND INVESTIGATION AUTHORIZATION

I. I understand that an investigative report may be generated on me that may include information as to my character, work habits, performance and experience, along with reasons for termination of past employment, financial/credit history, criminal history records from any criminal justice agency in any or all federal, state, city and county jurisdictions, state Department of Motor Vehicle/Drivers' License Records to include traffic citations and registration, military records from the National Personnel Record Center, education records including transcripts, and requests for records and information from any individual, company, firm corporation, present and/or past employers and public agencies (including the Social Security Administration and the Immigration & Naturalization Service). I fully understand that Northern Arizona University and /or their agent American Background Information Services, Inc., may be requesting information from public and private sources about any of the information noted earlier in this paragraph, and I freely give my consent for Northern Arizona University and American Background Information Services, Inc. to do so.

II. According to the Fair Credit Reporting Act (FCRA), I am entitled to know if the considerations for which I am applying are denied because of information obtained from a consumer-reporting agency. If so, I will be notified and be given the name of the agency providing that report.

III. I agree that a photocopy or telephonic facsimile of this authorization shall be valid as the original. This release is valid for most federal, state and county agencies.

IV. I hereby authorize, without reservation, any one contacted by Northern Arizona University and /or their agent American Background Information Services Inc., to furnish the information described in Section 1.

V. I hereby authorize, without reservation, Northern Arizona University and / or their agent, American Background Information Services Inc., to contact my present employer for employment verification/references.

APPLICANT: COMPLETE THE FOLLOWING:

Signature

Today's Date

Please print full name

The following information is required by law enforcement agencies and other positive identification purposes when checking public records. It is confidential and will not be used for any other purposes.

Please print other names you have used

Security Number is optional.
order to confirm your identity for
accurate background investigation.

Social Security Number - Supplying your Social
Your Social Security Number will only be used in
purposes of completing an

Date of Birth - The Age Discrimination in Employment Act of 1967 and the Arizona Civil Rights Act prohibit discrimination on the basis of age with respect to individuals who are at least 40 years of age. Your date of birth is required on this form in order to confirm your identity for purposes of completing an accurate background investigation, and is not provided to the hiring official for any purpose in connection with consideration of your application for employment.

Home Address

City

State

Zip

Driver's License Number and State

Name as it appears on License

Have you ever been convicted of or plead guilty to a crime? No Yes (A conviction will not automatically disqualify you from being considered as a candidate for employment.) If yes, please explain:

FAIR CREDIT REPORTING ACT, DRIVER'S PRIVACY PROTECTION ACT, and ANY APPLICABLE STATE STATUE (S) NOTICE:
In accordance with the Fair Credit Reporting Act, this information may only be used to verify a statement(s) made by an individual in conjunction with legitimate business needs. The depth of information available varies from state to state. The report that will be generated for employment purposes only and in compliance with the Fair Credit Reporting Act, the Driver's Protection Act, and any applicable state statue(s).