

Technical Experience

Please rate your technical experience in each of the following areas:

Software	High	Med	Low	None
Word				
Excel				
PowerPoint				
Access				
Email/Web				
SPSS				
Windows OS				
Macintosh OS				
Linux				
Database				

Hardware	High	Med	Low	None
Mac				
Windows				
Printers				
Photocopiers				
Projectors				
Document Camera				
Audio Systems				
Video Conference				
A/V Equipment				
Networking				

Education

Current Major or Degree Program _____ Anticipated Date of Graduation _____

References

Please list two professional references.

Full Name: _____ Relationship: _____
 Company: _____ Phone: _____
 Address: _____
 Full Name: _____ Relationship: _____
 Company: _____ Phone: _____
 Address: _____

Previous Employment

Company: _____ Phone: _____
 Address: _____ Supervisor: _____
 Job Title: _____
 Responsibilities: _____
 From: _____ To: _____

May we contact your previous supervisor for a reference? Yes No

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information on my application or in my interview may result in my release.

Signature: _____ **Date:** _____
Typing your name above confirms your signature