

UNIVERSITY OF COLORADO AT BOULDER
OFFICE OF FINANCIAL AID/STUDENT EMPLOYMENT
OFF-CAMPUS/COMMUNITY SERVICE WORK-STUDY
2006-2007
Freshman/Transfer Mailing

To be listed in the 2006-2007 freshman/transfer mailing, please fax (303-492-4544) or mail (77 UCB, Boulder, CO 80309-0077) this form to the Student Employment Office. If you have questions as you complete it, please contact the CU Student Employment Office (303-492-3548) for assistance.

Agency: _____

Contact: _____

Location: _____ FAX #: _____

E-Mail Address: _____

Phone #: _____ Payrate: _____ # of Positions Open: _____

Job Title: _____

Term(s): Fall _____ Spring _____ Summer _____ Approximate Hours Per Week: _____

Would you also like this job posted on the Web (and our Job Boards)? Yes ___ No

Does this job address any of the following areas? (Leave blank if not applicable.)

- | | |
|--|---|
| <input type="checkbox"/> Childcare | <input type="checkbox"/> Housing or Neighborhood |
| <input type="checkbox"/> Community Improvement | <input type="checkbox"/> Human Services |
| <input type="checkbox"/> Conservation Corps Program | <input type="checkbox"/> Literacy Training |
| <input type="checkbox"/> Crime Prevention | <input type="checkbox"/> Public Training |
| <input type="checkbox"/> Counseling | <input type="checkbox"/> Rural Development |
| <input type="checkbox"/> Service for the Disabled | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Education/Tutorial Services | <input type="checkbox"/> Welfare or Social Services |
| <input type="checkbox"/> Environmental Improvement | <input type="checkbox"/> Youth Corps Program |
| <input type="checkbox"/> Health Care | <input type="checkbox"/> Other: _____ |

Are the services that your agency provides available to the general public? ___ Yes ___ No

Specific Job Duties and Qualifications:

Background check required? Yes: ___ No: ___

FOR OFFICE USE ONLY

REVIEWED BY: _____ ENTERED BY: _____ JOB #: _____