

# Non-Work Study Employment Application

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Arkansas Tech University – Ozark Campus  
P.O. Box 506, Ozark, Arkansas 72949  
Phone: 479-667-2117  
Fax: 479-667-2106

## Personal Data

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Name \_\_\_\_\_

Present Address \_\_\_\_\_

City, State & Zip Code \_\_\_\_\_

Social Security Number \_\_\_\_\_

Phone Number \_\_\_\_\_ Message Phone Number \_\_\_\_\_

Driver's License: Operator \_ CDL \_

## Education

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CHECK HIGHEST SCHOOL YEAR COMPLETED

\_ HS \_ AA \_ BA \_ MA \_ Ph.D.

Name of school beyond High School \_\_\_\_\_

Major \_\_\_\_\_ Date Completed \_\_\_\_\_

Vocational Training \_\_\_\_\_

Are you a Veteran of Military Service? \_\_\_\_\_

## Work Experience

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Company Name \_\_\_\_\_

Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Dates of Employment: Start \_\_\_\_\_ End \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

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**Work Experience**

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Company Name \_\_\_\_\_

Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Dates of Employment: Start \_\_\_\_\_ End \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

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**Work Experience**

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Company Name \_\_\_\_\_

Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Dates of Employment: Start \_\_\_\_\_ End \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

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**Additional Information**

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Specialized Training \_\_\_\_\_

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Volunteer Work \_\_\_\_\_

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**References**

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Name	Address	Phone Number
_____	_____	_____
_____	_____	_____
_____	_____	_____

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Notice to applicants:** Information that you provide on this application is subject to verification. Previous employers may be contacted for references.