

**Summer Student Lab Worker Application**  
**Computer Science Department**

Name \_\_\_\_\_

Student M Number \_\_\_\_\_

Address \_\_\_\_\_

Cell Phone \_\_\_\_\_

What is your major? \_\_\_\_\_

E-mail Address(es) \_\_\_\_\_

**Work Qualifications**

Are you a full-time MTSU student? \_\_\_\_\_

Are you eligible for work study? (if you don't know, you can check with Financial Aid about it.) \_\_\_\_\_

How many hours per week would you like to work? (Work study is limited.) \_\_\_\_\_

List Computer Science courses completed and currently enrolled in: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List other areas of expertise or knowledge: \_\_\_\_\_

Have you completed STA training? \_\_\_\_\_

If so, what level? \_\_\_\_\_

*Please indicate below the times that you are available to work with a "X" in the appropriate box. If there are any hours you really prefer, please put a "P" in those boxes. Also, please attach your class schedule so we can cross check times that may come available.*

Session _____					Session _____				
	M	T	W	R		M	T	W	R
8:00-9:00					8:00-9:00				
9:00-10:00					9:00-10:00				
10:00-11:00					10:00-11:00				
11:00-12:00					11:00-12:00				
12:00-1:00					12:00-1:00				
1:00-2:00					1:00-2:00				
2:00-3:00					2:00-3:00				
3:00-4:30					3:00-4:30				

*I understand that by signing this form, I have the responsibility to*

\_\_\_\_ Notify the Lab Manager if my information regarding enrolled hours changes;

\_\_\_\_ Ensure that the lab will never be left unattended and equipment will not be tampered with or removed during my assigned work period(s);

\_\_\_\_ Call another lab worker to sub for me if I am unable to work my assigned period(s) at any time; if I am unable to do this, I will contact the Lab Manager directly;

\_\_\_\_ Abide by and uphold policies and procedures of MTSU and the Computer Science Department.

Signed \_\_\_\_\_

Date \_\_\_\_\_