Jackson State University

Department of Speech & Theatre Rose McCoy Auditorium 17126 Jackson, MS 39217

APPLICATION FORM WORK STUDY

FOR OFFICE USE

APPLICATION FOR STUDENT WORK STUDY IN DEPT. OF SPEECH & THEATRE Please fill in all the blanks.

Return to Coordinator of Theatre Studies Mrs. Bodie-Smith in mailbox or Rm 105.

Name:				E-mail:			
Local Address:				Phone:		J#:	
City:	State:	Zip:		Circle: FR SOPH	JR S	R Major/Minor:	
Will you be awarded College Work study? Y N 1st Sem \$ 2nd Sem \$							
Grade Point Average: Cumulative: Last Semester:							
Have you been employed by JSU before? Y N Department:							
List any special Skills/Interest:							
Please check work study area you would like to be assigned:							
i lease check work study area you would like to be assigned.							
Scene Shop Costume Shop Box Office Front of House Promotions/Media							
Reasons for desiring work study:							
LIST PRODUCTION EXPERIENCE AT JSU (OR RELATED EXPERIENCE)							
LIST TRODUCTION LATENCE AT 350 (OR RELATED EATENCE)							
1							
2							
3							
Signature:			_	Date:			
Accept 🗌 Yes 🔲 N	lo Salary		Area	of Assignmen	t	Supervisor Initials	