

Resident Manager Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Campus Address _____

Cell Phone: _____ Email _____

Major: _____ A #: _____ Cumulative GPA: _____

Anticipated Date of Graduation – Month/Year: _____

Dates of Student Teaching, Internship, Practicum, etc. if applicable: _____

Which Semester/Year do you wish to Begin Work? Fall _____ Spring _____

Have you read manager's job description/responsibilities? Yes _____ No _____

References

Please list two references:

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

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

Please include your resume with this application.

Application Return:

Please complete this application and return it to Graig Eichler, 117 Morris Conference Center.