

Application for FWS Employment-Aultman College of Nursing and Health Sciences

Date:		Current Term:	
Last Name:	First Name:		MI:
Address:			
Phone:	SSN:	Email:	
Academic Status:		Current Semester:	
Anticipated Graduati	on Date:	Program:	
Are you available for	weekend hours?	Yes No	
Please check the FW	S position you are app	plying for: (Limit to 2)	
Academic Affairs A	Assistant 🗍 Skills Lak sistant 📗 Financial A	al Affairs/Health Services Assistant [b Assistant	
Please print and sign	the application and s	submit to the Main Office.	
I hereby certify that t	he information on m	y application is true and accurate.	
Signature:		Date:	