

# COPIAGUE PUBLIC SCHOOLS



## APPLICATION FOR POSITION OF STUDENT WORKER

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(Last) (First) (Initial)

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
(Street)

\_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Town) (State) (Zip) (M) (D) (Y)

Social Security No.: \_\_\_\_\_

Name of School now attending: \_\_\_\_\_

Grade completed as of application date: \_\_\_\_ WORKING PAPERS MUST BE ATTACHED.

Position for which applying: \_\_\_\_\_

Person to be contacted in case of emergency:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
 Signature of Applicant

### SCHEDULE

<u>Period</u>	<u>Subject</u>	<u>Teacher</u>
1	_____	_____
2	_____	_____
3	_____	_____
4	_____	_____
5	_____	_____
6	_____	_____
7	_____	_____
8	_____	_____
9	_____	_____

Please have two (2) teachers sign as references for this position.

I recommend \_\_\_\_\_ for the position listed above.  
(Name of Student)

(1) \_\_\_\_\_ (2) \_\_\_\_\_  
(Signature of Teacher) (Signature of Teacher)

**AN EQUAL OPPORTUNITY EMPLOYER**

**2650 Great Neck Road, Copiague, New York 11726 631-842-4015 FAX 631-841-4621**