

Notetaking Application

Name: _____ S.S./ID # _____

Local Phone: _____ E-Mail: _____

Year in School: _____ GPA: _____

Federal Work Study: Yes No

What is the maximum number of hours you would like to work? _____

Please attach a current semester schedule.

In addition to the courses in which you are enrolled, you may take notes for other courses. If you are interested in a particular course or a specific time block to work, please meet with a notetaking supervisor.

All correspondence will be placed in your Notetaking mailbox in the Achieve Student Lab located in room 111 (across the hall). In addition, if we need to contact you directly, how would you prefer to be contacted: phone: _____ e-mail: _____

Please list any questions you may have:

On the lines provided, in essay form, please explain why you would like to be a notetaker for the Achieve Program. Indicate any particular experience that you feel would aid you as a notetaker.

For Staff Use Only:

Application Date: _____ Interview Date: _____

Orientation Date: _____ Orientation Completed: _____

Clinical Staff #: _____