



**Parking & Transportation Services
Application for Employment**

Personal Information

Last Name

First Name

Middle Name

Student ID Number

Louisville Street Address

City

State

Zip Code

Permanent Street Address

City

State

Zip Code

Cell Phone #

Home Phone #

University email address

Emergency Contact

Emergency Phone #

Date available for employment

Referred by

Position (s) desired

Do you have a valid driver's license? -----

Academic Information

Major/Minor/School or College----- Current GPA:-----
Minimum 2.5 from previous completed semester

Year: FR SO JR SR Expected date of Graduation: -----

Campus Involvement

Please list all CAMPUS extra-curricular activities, scholarships, positions, organizations, awards, intramurals, study abroad.



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Please list other areas you are interested in (e.g. sports, hobbies, community service work).

EMPLOYMENT INFORMATION

Previous Employer #1: ----- Position: -----

Duties: ----- Dates: -----

Supervisor & Phone: -----

Previous Employer #2: ----- Position: -----

Duties: ----- Dates: -----

Supervisor & Phone: -----

I authorize the University of Louisville and its agents to investigate the information provided by me in this application and supporting material and to conduct a criminal background check, and I release any such school or former employer and its agents from any liability for releasing such information.

- **Time off must be requested in advance and approved via email.**
- **Students are expected to provide their class schedules prior to each semester for arrangement of departmental work shifts.**
- **UofL Parking & Transportation is a seven-day-a-week operation.**

Signature Date

Please fax application to 852-6680, e-mail to ulpark@louisville.edu, or mail to:

**UofL Parking & Transportation Services
2126 S Floyd St Ste 100
Louisville Ky 40208**



Parking & Transportation Services Student Employee Recommendation

Applicant: _____ **Date:** _____

The student named above is applying for a position with University of Louisville Parking & Transportation Services. The purpose of this form is to assist us as we consider applicants. We appreciate your candid evaluation of the student applicant based upon your experience with him/her.

This position requires the student to serve as a customer service representative for members of the University of Louisville community and visitors alike. Student workers must be capable of learning and interpreting Parking rules & procedures. They must also be able to effectively communicate these procedures in a professional manner to the customer.

How long have you known the applicant? _____

In what capacity do you know the applicant? _____

Please evaluate the applicant based on each of the following traits.
1=low 5=high NB=No basis for judgment.

Ability to communicate	1	2	3	4	5	NB
Enthusiasm	1	2	3	4	5	NB
Punctuality	1	2	3	4	5	NB
Responsibility	1	2	3	4	5	NB
Dependability	1	2	3	4	5	NB
Friendliness	1	2	3	4	5	NB
Maturity	1	2	3	4	5	NB
Judgment	1	2	3	4	5	NB
Problem Solving	1	2	3	4	5	NB



Please list any other information you feel describe the student's ability to represent the University of Louisville.

Signature: _____ Date: _____

Printed Name: _____

E-mail: _____

Contact number: _____

Please fax recommendation to 852-6680, e-mail to ulpark@louisville.edu, or mail to:

UofL Parking & Transportation Services
2126 S Floyd St Ste 100
Louisville Ky 40208
(502) 852-7275