



Employment Application Form

Return to: ILP
363 N. University Ave. #104
Provo UT 84601

Contact Information:

Date Submitted: _____

Legal Name _____

Preferred Name _____
Last First MiddleBirth Date ____/____/____ SS# _____
mm dd yyCurrent Address _____
Street Address Current Phone (____) __________
City State Zip Code Cell Phone (____) _____

ILP can contact me at this address until: _____

Permanent Address _____
Street Address Permanent Phone (____) __________
City State Zip Code Fax (____) _____

Primary E-mail _____ Secondary E-mail _____

ILP Experience:

Country/City	Level	Semester	HT/Administrator

Employment Skills:

Please rate (1 is low, 10 is high)

Microsoft Word	1	2	3	4	5	6	7	8	9	10
Microsoft Excel	1	2	3	4	5	6	7	8	9	10
Microsoft Access	1	2	3	4	5	6	7	8	9	10
Email Applications (Outlook, Yahoo, Hotmail)	1	2	3	4	5	6	7	8	9	10
Typing WPM _____	1	2	3	4	5	6	7	8	9	10
Overall Computer Competence	1	2	3	4	5	6	7	8	9	10

Availability:

Semester you are applying for: Fall / Spring 20____

Please check one of the following:

- I would also like to be considered for future semesters.
- This is the only semester that I am available.

You will work 4 shifts. Please indicate which shifts you are available:
(There are also a limited number of morning and afternoon shifts.)

- Monday 2 pm to 7 pm
- Tuesday 4 pm to 9 pm
- Tuesday 5 pm to 10 pm
- Wednesday 4 pm to 9 pm
- Wednesday 5 pm to 10 pm
- Thursday 4 pm to 9 pm
- Thursday 5 pm to 10 pm
- Friday 2 pm to 7 pm
- Saturday 10 am to 3 pm

★Please attach a copy of your resume

Essays:

Tell us about your ILP experience.

Why do you want to be an ILP Employee?