

The College Success Program for Students with Autism Spectrum Disorder Graduate Mentor Job Application

SECTION 1 OF 7: PERSONAL INFORMATION

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| Name: | Gender: |
|---------------------------------------|---------------------------------------|
| Address: | |
| Phone numbers: Cell: | |
| | |
| Email address: | |
| SECTION 2 OF 7: EASTERN UNIVER | |
| Program name: | |
| Degree: | |
| Are you a: 🔲 new student or 🗌 | |
| Are you enrolled: 🗌 full-time or 🗌 |]part-time Estimated graduation date: |
| SECTION 3 OF 7: UNDERGRADUAT | E EDUCATION |
| College: | |
| | Degree: |
| Major: | GPA: |
| List any awards or honors received | : |
| List campus clubs or activities in wl | hich you participated: |

List leadership positions you held: _____

SECTION 4 OF 7: GRADUATE EDUCATION

| Colle | ege: | |
|--------|---|--------|
| From | n:To:Degree: _ | |
| Majo | or: | GPA: |
| List a | any awards or honors received: | |
| List c | campus clubs or activities in which you partici | pated: |
| | leadership positions you held: | |
| | TION 5 OF 7: WORK EXPERIENCE | |
| Curre | ent/most recent employer: | |
| | Address: | |
| | Phone number: | |
| | | |
| | Position held: | |
| | Date of employment (from/ to): | |
| | Name of Supervisor: | |
| | May I contact this person? 🗌 Yes 🔲 No | |
| Previo | ious employer: | |
| | Address: | |
| | Phone number: | |
| | Email address: | |
| | Position held: | |
| | Dates of employment (from / to): | |

| Name of Supervisor: | | |
|---------------------|--|--|
| | | |

| May I contact this person? | 🗌 Yes | 🗌 No |
|----------------------------|-------|------|
|----------------------------|-------|------|

Describe all relevant work experience with individuals with Autism Spectrum Disorder:

SECTION 6 OF 7: OTHER INFORMATION

| Do you have a valid driver's license? \Box Yes \Box No Will you have a car on campus? \Box Yes \Box No | | | | |
|--|--|--|--|--|
| Have you read and can you endorse Eastern University's mission and doctrinal statements? | | | | |
| 🗌 Yes 🔲 No | | | | |
| Have you read the CSP Graduate Mentor Job Description? 🗌 Yes 🔲 No | | | | |
| Do you understand the position requirements? Yes No | | | | |

SECTION 7 OF 7: SIGNATURE

I hereby declare the information provided by me in this application, including any supplemental attachment, is true, correct, and complete to the best of my knowledge. I understand that if employed, a misstatement or omission of fact on this application shall be considered cause for dismissal.

Signature: _____

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Date: _____

Eastern University is an Equal Opportunity Employer. Eastern University affirms its position as a Christian University of the liberal arts and asserts its right to employ persons who subscribe to the intent, mission, and doctrinal position stated in the university catalog. Additional details may be obtained from the Office of Human Resources.

Return application to: Eastern University CCAS—Walton 210 Attn: Sharon Thompson, CSP Coordinator 1300 Eagle Road St. Davids, PA 19087 sthompson@eastern.edu