



Employment Application Form

Return to:
299 E. 950 S.
Orem, UT 84058

Contact Information:

Date Submitted: _____

Legal Name _____

Preferred Name _____ Birth Date ____/____/____ SS# _____
mm dd yyCurrent Address _____ Current Phone _____
(____) _____ Street Address_____ Cell Phone _____
(____) _____ City State Zip Code

ILP can contact me at this address

until: _____

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

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?