## Auburn High School



## **Student Advisor Application**

Instructions: Please print and provide all the information requested.

Namė:		
Address:		
Social Security Number (for fin	gerprinting purposes):	
Home phone:	Cell Phone:	Work Phone:
<b>Education:</b>		
High School:		Years completed (circle): 1234+
Employment:		
Are you employed? Yes	No Retired	Student
Working hours and days:		How long employed:
Most recent or current employe	er:	
Supervisor:	Phone number:	
Why would you like to be an a contribute to the program (ac	Auburn High School Student dditional sheets may be atta	Advisor and how will you positively ached):

Please list any hobbies, interests, or skills (addi	tional sheets may be attached):
Being a student advisor may require approxima	ntely 1-2 hours per week.
The Auburn Enlarged City School District is requstudents. This is done through fingerprinting.	uired to check on individuals working with our The district will pay for this required service.
<ul> <li>Please note that all current Auburn School D requirement.</li> </ul>	district employees are exempt from the fingerprinting
If accepted as an advisor, I agree to the following	ng expectations:
<ul> <li>hours of 7:45am and 3:00pm. It is suggested</li> <li>In the event that you want to see a student of parent/guardian.</li> </ul>	tudent.  dent.  dent.  mid scheduled meetings.  mid with the mentor  as must occur at Auburn High School between the dent they take place in the Counseling Office.  ff campus, written permission is required by the mot be transported in personal vehicles. In the event
Signing this application indicates that you under expectations and that all information you provide	rstand and can work within the above ded is accurate.
Signature:	Date:

Applications may be returned to: Auburn High School, Attn. Steve Crosby, 250 Lake Avenue, Auburn, NY 13021. If you have any questions, contact Steve Crosby at 315-255-8314 or Annie Hoff, Counseling Secretary, 255-8338.

Rev: 06/2013