

North Carolina A&T State University

Aggie Call Center Application

Call Center Representative



Full Name:	Preferred Name:			
Date of Birth:	Gender: M	F Banner ID	#:	
Phone: ())		Alternate Phone: (()	
Campus Email Address:				
Secondary Email Address:				
Local Address:	Cit	y:	State:	Zip:
Permanent Address:	Cit	y:	State:	Zip:
Classification:	Expected Gra	aduation Date (MM/)	(YYY):	
College currently enrolled in? (Ex:	College of Education)			
Major	Minor_		Cumulative	G.P.A:/4
Employment History				
Position:	Company:		From	То
Position:	Company:		From	To
Are you currently (or soon to be) er		-		
If yes, where?		_ From (MM/YY) _	To (M	IM/YY)
Have you been granted Work Study	7? Yes N	Waiting	for Response	
Work Availability: The Aggie Call	Center operates Sunday	4:00p-8:00p and Mor	nday-Thursday 5:	30p-9:00p
(Please Note: You must be av	ailable to work a <u>minimu</u>	<u>1m</u> of 3 shifts per wee	k including 2 Sun	iday's per month)
Please circle your days of availability	y:			
	•			2 Sunday's per mon
How did you hear about us?				
By signing this applic	ation, you are indicating	; that all information	given is true and	accurate.
Signature:		Date:		
Email a PDF attachment of the comp	subject line or Regetta 1601 East N Dowdy Build	pearman@ncat.edu submit/mail to: Spearman Market Street ding, Suite 400 ro, NC 27411	vith "Aggie Call C	enter Application" in