Student Grader Application

Name:_____   Bengal ID_____   D.O.B. _____

ISU Email: _____   Telephone: _____   Major: _____

College-level math classes you have taken (start with the highest level courses):

Course Number & Title:	Grade:	Instructor:	Univ./College:	Sem/Yr:
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Have you done any grading before?   ☐ Yes   ☐ No

If yes, please list:

Course Number & Title:	For (instructor):	Sem/Yr:	Dept. (if not Math):
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Have you held any other student jobs at ISU?   ☐ Yes   ☐ No

If yes, please list past and current positions:

Job Title:	Department:	Supervisor:	Hours per week
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

How many hours per week are you interested in working? _____

_____   _____
Signature   Date