**NEWSPAPER STAFF APPLICATION**

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| **Applicant Information** | | | | | | | | | | | | | | | | | | | | | |
| Last Name: | | | |  | | | | First: | | | | |  | | | | | | Student ID #: | |  |
| Street Address: | | | |  | | | | | | | | | | | | | | | Apt/Unit # | |  |
| City: |  | | | | | | | State: | | | | |  | | | | | | ZIP: | |  |
| Home Phone: | | | |  | | | | | | Mobile Phone: | | | | | | | | | | | |
| Email Address: | | | |  | | | | | | | | | | | | | | | | | |
| Desired Position(s): | | | |  | | | | | | | | | | | | | | | | | |
| Date Available: | | | | | | | | | | | | | | | | | | | | | |
| What student clubs/organizations are you a member of? | | | | | | | | | | | | | | | | | | | | | |
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| **RELEVANT Previous experience** | | | | | | | | | | | | | | | | | | | | | |
| Have you ever worked on a newspaper staff before? | | | | | | | YES | | | | NO | | | | If so, when? | | | | | | |
| Organization: | |  | | | | | | | | | | Phone: | | | | ( ) | | | | | |
| Address: | |  | | | | | | | | | | Supervisor: | | | | |  | | | | |
| Job Title: | |  | | | | | Paid or Unpaid? | | | | |  | | | | | |  | |  | |
| Responsibilities: | | |  | | | | | | | | | | | | | | | | | | |
| From: |  | | To: | |  | Reason for Leaving: | | |  | | | | | | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | | | | YES | | | NO | | | |  | | | | | |
|  | |  | | | | | | | | | |  | | | |  | | | | | |
| **EDUCATIONAL INFORMATION** | | | | | | | | | | | | | | | | | | | | | |
| Degree Program: | | | |  | | | | | | | | | | | | | | | | | |
| How many semesters do you have until you graduate/Transfer? | | | | | | | | | | | | |  | | | | | | | | |
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| **Time and availability** | | | | | | | | | | | | | | | | | | | | | |
| What hours are you able to work for the newspaper? List your availability for the current semester. | | | | | | | | | | | | | | | | | | | | | |
| **SUNDAY** | | | **MONDAY** | | | **TUESDAY** | **WEDNESDAY** | | | | | | **THURSDAY** | | | | | | **FRIDAY** | | **SATURDAY** |
|  | | |  | | |  |  | | | | | |  |  | | | | |  | |  |

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| **emergency contact information** | | | |
| *In case of an emergency, please list up to two persons who should be contacted.* | | | |
| Full Name: |  | Relationship: |  |
| Company: |  | Phone: |  |
| Address: |  | | |
| Full Name: |  | Relationship: |  |
| Company: |  | Phone: |  |
| Address: |  | | |

**Short Answers**Please answer each item in 100 to 200 words.

*NOTE: Essay response questions are for all positions. Applicants for artistic positions should be prepared to provide samples of work. All other non-editorial applicants should be prepared to demonstrate appropriate skills necessary for the position.*

1. What do you feel that you will bring to *The Uptown Exchange* if selected? Why have you chosen the staffing position(s) that you have indicated above? What unique talents, abilities, passions or perspectives will you bring to those positions in particular?

1. Why have you chosen to seek a position with *The Uptown Exchange?* What has attracted you to the field of journalism/newspaper business?

This application is to be handed in to Ben Ortiz, faculty adviser. Drop it in his mailbox in the English Department (room 2915), hand it over to him during his office hours, or hand it over to someone in the newsroom (room 1567, in the cafeteria).

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| **Disclaimer and Signature** | | | |
| I certify that my answers are true and complete to the best of my knowledge. If this application leads to my involvement, I understand that false or misleading information in my application or interview may result in my release. | | | |
| Signature |  | Date |  |
|  | | | |
| **release of liability** | | | |
| In consideration of all activities being provided for the undersigned by Truman College and The Uptown Exchange, the undersigned hereby releases Truman College and The Uptown Exchange—as well as the City Colleges of Chicago—their successors and assigns from all liability of expense which they might incur due to any personal injury or property loss as the result of his or her participation in said activities. | | | |
| Signature |  | Date |  |