

# **UCA Student Worker**

## **JOB DESCRIPTION FORM**

### ***CONTACT INFORMATION:***

**Department:** Student Health Clinic  
**Building:** Student Health Building, 1<sup>st</sup> Floor  
**Name of Supervisor:** Lisa Crafford, Office Manager  
**Phone:** (501) 450-3136      **Fax:** (501) 450-3370      **Email:** lcrafford@uca.edu

### ***JOB DESCRIPTION:***

**Job Title:** Office Assistant – Receptionist  
**How to Apply:** In person at SHC – Student Health Building, 1<sup>st</sup> Floor  
**When to Apply:** Anytime during normal clinic hours  
**Days/Hours/  
Duration:** Varied; M – F / 8:00 am to 5:30pm (will work with class schedules)  
  
**Wage:** \$9.25/hr

***Qualifications:*** SHC is looking for someone who has excellent customer service skills and will be pleasant and professional in all circumstances. Must have previous medical office experience. Candidate must have knowledge of HIPAA and be able to maintain confidentiality under all conditions. Experience with Electronic Health Record is a plus. Detail oriented and strong written and verbal communications skills is very important. Applicant must have completed 36 credit hours with 24 of those hours from UCA. Must qualify for Federal Work Study Funds.

***Duties & Responsibilities:*** Work with SHC front office staff answering phones, making appointments, and checking-in patients; includes data entry, scanning and organizing immunization records. Campus errands, cleaning waiting areas, and other office duties as assigned. Due to the fast-paced environment, this position will not allow for study time or time to do homework.

# Application for Student Employment

The University of Central Arkansas is an **Equal Opportunity Employer**, and therefore does not discriminate on the basis of race, color, religion, national origin, sex, gender, age, or disability.

Please answer all questions which apply to you. If they do not apply, mark them N/A. Please print or type.

Last Name	First Name	M.I.	Student ID#
Complete Mailing Address	City	State	Zip
Home Phone	Message Phone	E-Mail Address	

## Work History

List all prior work experience, including military service, use additional sheet(s) of paper if needed. If you wish to include a resume' instead of completing the work history section, make sure all the requested information is included.

Current or most recent Employer Name/Address:	From Mo/Yr	To Mo/Yr
Supervisor's Name:	Telephone #: ( )	
Job Title & Duties:	Reason For Leaving:	
May we contact your current or most recent employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Past Employer Name/Address:	From Mo/Yr	To Mo/Yr
Supervisor's Name:	Telephone #: ( )	
Job Title & Duties:	Reason For Leaving:	
May we contact your past employer(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No		

## Educational History

Student Standing (Please circle):

Freshman      Sophomore      Junior      Senior      Post Baccalaureate

Declared Major: \_\_\_\_\_

**Please Answer the Following:**

How many credit hours have you completed at UCA? \_\_\_\_\_

Have you ever worked in a medical office? \_\_\_\_\_

What organizations do you belong to? \_\_\_\_\_

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**References**

Please list three (3) persons not related to you, who have knowledge of your work qualifications, are not previous or current employer(s), and can serve as a reference for you.

- 1. \_\_\_\_\_ Ph# \_\_\_\_\_
- 2. \_\_\_\_\_ Ph# \_\_\_\_\_
- 3. \_\_\_\_\_ Ph# \_\_\_\_\_

**Carefully review the following before signing this application**

Check over your answers to make sure that all questions have been completed properly.

I hereby declare that, to the best of my knowledge and my ability, the information on this application is true and factual, therefore, I understand that false, misleading, or incomplete statements could lead to my rejection as an applicant or dismissal as an employee.

I also understand that I will be required to provide proof of eligibility to work in the United States pursuant to the Immigration Reform and Control Act of 1986 as a condition of any employment, and that some jobs may require special background checks, driver's safety record, security clearance, physical fitness exams, or compliance with other specific agency hiring policies prior to my employment, or as a condition of employment; and that failure to meet these requirements may lead to my rejection as an applicant for, or termination from that job. I understand that my application may be subject to disclosure as a public record under the Arkansas Freedom of Information Act. I understand that the University is an at-will employer consistent with Arkansas Law. I understand that my employment may be subject to review and approval through the State Department of Finance & Administration or other agencies in compliance with the Governor's Executive Order 98-04 or with other rules and regulations.

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date of signature (Day/Mo/Yr)