

## Job Shadowing Experience Interest Form

### Student Information:

Name: \_\_\_\_\_

School: \_\_\_\_\_

Year in School: \_\_\_\_\_

Major (if undergrad/grad): \_\_\_\_\_

Email: \_\_\_\_\_

**Why are you interested in doing a job shadow with UNC's Archives?**

**When are you hoping to schedule a job shadow experience?**

Semester: \_\_\_\_\_ Academic Year: \_\_\_\_\_

*Please note that the Archives are open Monday-Friday 9am-5pm and job shadows are currently not available on weekends. Contact us if you have scheduling concerns.*

Please email completed forms to [library.archives@unco.edu](mailto:library.archives@unco.edu)