



WWU Student Employment Application

Please complete all portions of this application and submit to the hiring department, if requested in the job posting. Incomplete applications will not be reviewed. Your application will be reviewed as soon as possible. Only those students selected for an interview will be contacted. Please note that a criminal and employment history background check may be performed prior to offer of employment.

Applicant Information

Position Applying for:

Start Date Available:

WWU ID Number:

Full Name:

Address:

Street Address

Apartment number/unit

City

State

ZIP Code

Phone:

WWU E-mail Address:

Days	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Times Available							

Are you a citizen of the United States? Yes No If no, are you authorized to work in the U.S.? Yes No

Have you been awarded Work Study? Yes No If not, are you on the Work Study Wait List? Yes No

Current Year Work Study Award:

Fall:

Winter:

Spring:

Academic Information

Class Level:

Major Interest:

Previous Employment or Volunteer Activities (Most Recent)

Employer: _____ Phone: _____
Address: _____ Job title: _____
Supervisor: _____ Starting Pay: _____ Ending Pay: _____
Responsibilities: _____
From: _____ to: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference? Yes No

Employer: _____ Phone: _____
Address: _____ Job title: _____
Supervisor: _____ Starting Pay: _____ Ending Pay: _____
Responsibilities: _____
From: _____ to: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference? Yes No

Additional Information: Please list special job-related skills or experience you want to include - for example computer software, specific office equipment, volunteer activities, club membership, athletic activities, language skills, customer service skills, cash handling experience, child care experience, awards earned, etc. You may use as much space as you need:

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge. By signing this application, I understand that my references may be contacted to verify to verify previous employment.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature _____

Date: _____

If this form is submitted electronically, signature can be obtained upon interview or hiring

Emergency Contact: _____

Phone: _____

Employing Department Use Only

Reviewed By:

Yes No

Notes

Interviewed?

Hired?

WS Award?

Staff Signature

Date