

APPLICATION FOR STUDENT EMPLOYMENT

PLEASE PRINT OR TYPE.
File form with employing agency.

An Equal Opportunity Employer

Name of Applicant		Position Applied For			Telephone No.	
Address		City	State	Zip Code	Date of Birth	Social Security No. (for identification only)

PERSONAL	YES	NO	In the section below, if the answer to items 1, 2 or 3 is YES, you are required to answer the accompanying questions. A YES answer to these questions will not automatically bar you from employment.				
			1. In the past five (5) years, have you been removed from a position as a result of misconduct or resigned to avoid such removal?		1. If yes, give name and address of employer(s) and reason(s) for separation.		
			2. Within the past five (5) years, have you been convicted of any law violation? (Exclude minor traffic violations)		2 & 3. If yes, give law enforcement authority (city police, sheriff, FBI, etc.), offense, date of offense, place and sentence.		
			3. Have you ever been convicted of a felony?				

EDUCATION	4. Are you now a full-time regular student? <input type="checkbox"/> Yes <input type="checkbox"/> No		5. School, college or university you are now attending or last attended: NAME ADDRESS								
	6. Current Grade/Classification High School _____ College _____ Graduate School _____ 1st Yr. _____ 2nd Yr. _____		Other School _____		7. If you are not presently attending school A. When were you last registered B. When do you plan to return to school						
					<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:50%;">MO.</th> <th style="width:50%;">YEAR</th> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> </table>		MO.	YEAR			
MO.	YEAR										

8. LIST PREVIOUS WORK EXPERIENCE ON REVERSE SIDE OF THIS SHEET

AUTHORIZATION	I have completed this application with the knowledge and understanding that any or all items contained herein may be subject to investigation prescribed by law and I consent to the release of information concerning my capacity and fitness by employer, educational institutions, law enforcement agencies, hospitals and other individuals and agencies to duly accredited investigators, personnel technicians and other authorized employees of the state government for that purpose.	
	I certify that the answers I have given to all questions in this application are true to the best of my knowledge. If I am appointed, I agree to promptly notify the proper agency official of any change in my status as a student, including any reduction in courses taken, termination of student status, or scholastic probation.	
	Signature of Applicant	Date

REPORT OF SCHOOL OFFICIAL

YES	NO	THE RECORDS OF THIS SCHOOL INDICATE THAT THE APPLICANT NAMED HEREIN	
		A. Is classified as a full-time regular student of this school under its criteria	D. Current Grade/Classification _____
		B. Has completed his course and received a diploma or certificate or has graduated	
		C. Has applied for enrollment in this school effective (give date): _____	
		Is your school accredited?	
		Is your school approved by the state in which it is located?	
Name of School		Address	
Signature of School Official		Title	Date

AGENCY REVIEW OF STUDENT STATUS

Date Reviewed	Initials	Date Reviewed	Initials	Date Reviewed	Initials	Date Reviewed	Initials	Date Reviewed	Initials
1.		2.		3.		4.		5.	

The following information is collected to compile equal opportunity reports, as required by law. You **ARE NOT** legally obligated to provide this information.

RACIAL/ETHNIC GROUP

☐ White ☐ Black ☐ American Indian ☐ Asian/Pacific Islander ☐ Hispanic ☐ Eskimo/Aleutian

19. Sex

☐ Male ☐ Female

PRESENT AND PREVIOUS EMPLOYMENT - Start with Present and Most Recent Position

DATE (Month/Year)		NAME AND ADDRESS OF EMPLOYER	POSITION
From	To		

Have you worked under another name? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, give name(s)	May inquiry be made of your present employer? <input type="checkbox"/> YES <input type="checkbox"/> NO May inquiry be made of your former employers? <input type="checkbox"/> YES <input type="checkbox"/> NO Do you have a legal right to work in the United States? <input type="checkbox"/> YES <input type="checkbox"/> NO
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MAY PUT ADDITIONAL WORK EXPERIENCE BELOW.