



Application for Student Employment

PERSONAL INFORMATION

Name: _____ Student ID #: _____

Telephone #: _____ Email Address: _____

Do you qualify for work study? Yes No

Are you currently employed on campus? Yes No

If Yes, how many hours per week? _____

Do you have relatives employed in the department in which you are applying? Yes No

If Yes, please give names: _____

College Major: _____ Current GPA: _____

Classification: Freshman Sophomore Junior Senior Graduate Other: _____

Are you legally entitled to work in the United States? Yes No

Documentation of your identity and employment eligibility must be provided upon hire as required by the Immigration Reform and Control Act of 1986.

WORK EXPERIENCE

Name and Contact Information of Employer: _____

Name of Supervisor: _____

Position/Job Duties: _____

Hire Date: _____ End Date: _____

Reason for Leaving: _____

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Position/Job Duties: _____

Hire Date: _____ End Date: _____

Reason for Leaving: _____

List any additional experiences, skills, or qualifications including military experience which are relevant to your area of employment interest (do not list any information that federal and/or state law precludes obtaining in the pre-employment stage):

REFERENCES

Please list the names and contact information of three references.

Name: _____ Contact information: _____

Name: _____ Contact information: _____

Name: _____ Contact information: _____

SCHEDULE

Please submit a copy of your schedule with your application.

CERTIFY AND SUBMIT

I fully authorize the investigation and verification of any statements made by me in my employment application/resume and any other materials submitted by me in connection with my effort to obtain employment with SWOSU. I expressly authorize a SWOSU representative to contact all listed employers and/or references. I further authorize any person, school, past employer, or other person, organization, or entity listed in my application, any resume or other maters submitted by me and such contact deemed relebant by SWOSU to provide SWOSU with any information requested that may be relevan and useful to SWOSU in making a hiring decision. I expressly release any such person, organization, or entities from any and all legal liability, without reservation, for making disclosure of any information about me, which it is permitted, by law, to release.

I certify the facts set forth in my application and other materials submitted are accurate and complete. I understand that falsifying information on this application will be sufficient grounds for termination of my employment or cancellation of job offer without notice hereafter.

Signed: _____ Date: _____

SWOSU does not discriminate on the basis of race, color, national origin, sex, disability, genetic information, or age in its programs and activities. The following person has been designated to handle inquires regarding the non-discrimination policies: Director of HR, 100 Campus Drive, Weatherford, OK 73096, (580) 774-3275.