

**Application for Employment
@ The Centers**

PLEASE TYPE OR PRINT ALL APPLICATION MATERIAL

Date _____

Name _____
(Last) (First) (Middle)

Star ID _____

Campus Address _____

Mustang ID _____

Permanent Address _____

Phone Number _____

E-mail Address _____

ACADEMICS

Major _____ Minor _____

Current Classification Freshman Sophomore Junior Senior

Anticipated Graduation Date _____ Cumulative GPA _____

Do you have any work experience that relates to the positions you are applying for? If so, please describe:

Will you have any commitments that might take you away from campus and your responsibilities as a staff member during the Fall or Spring semesters (i.e. student teaching, course projects, or internship)?

PREVIOUS WORK EXPERIENCE

Employer	Type of Work/ Position	Dates of Employment
_____	_____	_____
_____	_____	_____
_____	_____	_____

EXTRACURRICULAR ACTIVITIES / INTERESTS

Please identify any extracurricular activities including any leadership positions you have held:

REFERENCES

Please identify three people we may call on for a personal or work reference. It is suggested that at least one recommendation comes from a member of the University community if possible.

Name _____

Employer _____ Position _____

Email Address _____ Phone _____

Name _____

Employer _____ Position _____

Email Address _____ Phone _____

Name _____

Employer _____ Position _____

Email Address _____ Phone _____

BACKGROUND CHECK

The selection process for this position may include a review of your criminal history and finger printing. A criminal conviction will not necessarily disqualify an applicant from employment. Each case will be independently evaluated to determine the nature of the criminal offense and the applicant's fitness for the position.

Your Name _____
(Last) (First) (Middle)

Birth date: _____ Gender: Male Female Mustang ID: _____

Please list former places of residence for the last 5 years:

Address	Dates
#1 _____	_____
#2 _____	_____
#3 _____	_____
#4 _____	_____
#5 _____	_____

Have you ever been convicted of a crime (other than minor traffic offense) or are there any criminal charges pending against you? If yes - please explain:

YES NO

By signing this application form (below) you are authorizing: (1) The Centers @ SMSU to check your grade point average to verify that you meet the minimum standards, (2) release of any discipline information which may be on file with the University's Judicial Program, and (3) a review of your criminal history.

Signature _____ Date _____

This application and schedule can be returned by email to John.Alcorn@smsu.edu or directly to The Centers Office (Student Center 235).

Class/Activity Schedule

Name _____

Semester: _____

Please Indicate with an "X" the hours you are not available to work:

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
10:00-10:30 am							
10:30-11:00 am							
11:00-11:30 am							
11:30-12:00 am							
12:00-12:30 pm							
12:30-1:00 pm							
1:00-1:30 pm							
1:30-2:00 pm							
2:00-2:30 pm							
2:30-3:00 pm							
3:00-3:30 pm							
3:30-4:00 pm							
4:00-4:30 pm							
4:30-5:00 pm							
5:00-5:30 pm							
5:30-6:00 pm							
6:00-6:30 pm							
6:30-7:00 pm							
7:00-7:30 pm							
7:30-8:00 pm							
8:00-8:30 pm							
8:30-9:00 pm							