



## Student Employment Application

Name: \_\_\_\_\_  
                                 Last   First   M. I.

Address: \_\_\_\_\_  
                                 Street   City   State         Zip

Contact Information: \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
   Telephone    Email

Are you a current full-time or part time OSU student?  Full-time  Part-time

Year: \_\_\_\_\_ Major: \_\_\_\_\_

### **EMPLOYMENT POSITIONS**

Please select your interest area. (check all that apply)

- Maintenance       Cafe    Housekeeping                          Event Setup  
 Banquet

What date are you available to start work? \_\_\_\_\_

Please list the hours you are available to work for each day.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Please list your areas of highest proficiency, special skills or other experiences that may contribute to your abilities in performing the above mentioned positions.

### **PRESENT EMPLOYMENT**

Are you currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No		Current position:
Start date of employment (Mo./Yr.):		
Description of duties and responsibilities:		
<input type="checkbox"/> <input type="checkbox"/>		
Employer Name and Address:		
Supervisor Name:		Supervisor Phone:
Current Salary:		
May we contact this employer?    Yes    No		

## **PREVIOUS EMPLOYMENT EXPERIENCE**

Previous position:	
Dates of employment from (Mo./Yr.): to (Mo./Yr.):	
Description of duties and responsibilities:	
Employer Name and Address:	
Supervisor Name:	Supervisor Phone:
Final Salary:	Reason for leaving:
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Previous position:	
Dates of employment from (Mo./Yr.): to (Mo./Yr.):	
Description of duties and responsibilities:	
Employer Name and Address:	
Supervisor Name:	Supervisor Phone:
Final Salary:	Reason for leaving:
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

## **REFERENCES**

Please list two professional references.

Full Name:	Relationship:
Phone Number:	Address:

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Phone Number:	Address:

## **CRIMINAL HISTORY**

Have you ever been convicted of a criminal offense? Yes No

If yes, you must provide details. (*A conviction will not necessarily be a bar to this position. The nature of the offense, when it occurred, and its position-relatedness will be considered.*)

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## **DISCLAIMER AND SIGNATURE**

I certify that all the information given on this application is true and correct to the best of my knowledge. I understand that any misrepresentation or omission of facts on my part may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired.

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Signature

Date