



California State University  
 SAN MARCOS  
 Human Resources & Equal Opportunity  
 San Marcos, CA 92096-0001  
 An Equal Opportunity/Affirmative Action/Title IX Employer

General Information: 760-750-4418  
 TDD: 760-750-3238

### APPLICATION FOR STUDENT EMPLOYMENT

- ◆ Please type or print clearly in dark ink.
- ◆ All items must be completed. Incomplete applications may not be considered.
- ◆ Applications must be signed and dated by the applicant on the last page of this form.
- ◆ A separate application must be submitted for each position.
- ◆ Submit completed application to Human Resources & Equal Opportunity (HREO)

**Note: If you require special accommodations during the assessment process due to a disability recognized under the Americans with Disabilities Act, please notify the Human Resources and Equal Opportunity Office at the time you are invited to the testing.**

Cougar Job Number:	Department	Date of Application:
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Name (Last)	(First)	(Middle)	Previous Name
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ADDRESS: (Number and Street)	(Apt #)	(Home Phone)	(Work Phone)
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(City)	(State)	(Zip Code)	(E-mail)	(Cell Phone)
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Student Assistant       Federal Work Study      Student ID Number \_\_\_\_\_

Are you over the age of 18?  YES  NO      If not, can you furnish a work permit indicating right to work?  YES  NO

If hired, and you are a nonimmigrant student you will be required to furnish proof of a Form I-94 accompanied by a Form I-20 Student ID endorsed with employment authorization by the Designated School Official (**CSUSM Global Affairs Department**). Can you furnish such proof?  YES  NO

Do you have any relatives who are employees of California State University San Marcos?  Yes  No

<u>Name</u>	<u>Department</u>	<u>Relationship</u>

As an adult, have you ever been convicted of any crime (except traffic violations other than felonies)? Yes  No . A conviction includes a plea, verdict or finding of guilt, regardless of whether a sentence was imposed by the court. (**Note: A conviction will not necessarily disqualify an applicant from employment.**) You need not provide information about marijuana possession convictions for a violation of Health and Safety Code Section 11357(b) or (c), Section 11364, 11365, or 11550 that occurred more than two years ago.

Have you been arrested for any criminal offense for which you are out on bail, or on your own recognizance, pending trial? Yes  No

If yes, please explain: \_\_\_\_\_

**(Note: The employer cannot use such an arrest as a basis to deny employment, unless you are convicted).**

If the position you are applying for requires a valid driver's license, please fill in the following:

(Driver's License #)	(Class)	(Expiration Date)	(State)
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#### EDUCATION

Do you have a High School diploma? Yes  No       If no, do you have a GED? Yes  No

If the position for which you are applying requires a degree or certificate, please attach a copy of your transcripts or certificate/diploma to your application.

College or University/Business/Trade/Technical			
Name and location of school	Major field of study	Degree/certificate received	Graduate? Yes <input type="checkbox"/> No <input type="checkbox"/>

Professional / technical licenses / certificates :			
Type of License	License/Certificate #	Issued By	Expiration Date

**EXPERIENCE**

Start with your current or most recent job. List all jobs and any periods of unemployment in the last ten years. Also list jobs beyond ten years if the experience helps to qualify you for the position. Include paid or unpaid, full or part-time, summer jobs, etc. **Please attach additional copies of this sheet if necessary. This section must be fully completed. A resume may be attached, but may not be substituted for completion of this section.**

Dates of Employment(Month/Year):			Employer Name:			Position Title:								
From:		To:	Employer Address:			Supervisor's Name/Title:								
Salary or Earnings:									Hours per week:			Phone # (    )		
Starting	\$	/yr												
Ending	\$	/yr												
Duties Performed:														

May we contact this employer? Yes \_\_\_ No \_\_\_ Reason for leaving/wanting to leave:

Dates of Employment(Month/Year):			Employer Name:			Position Title:								
From:		To:	Employer Address:			Supervisor's Name/Title:								
Salary or Earnings:									Hours per week:			Phone # (    )		
Starting	\$	/yr												
Ending	\$	/yr												
Duties Performed:														

May we contact this employer?  Yes  No Reason for leaving/wanting to leave:

**AVAILABILITY**

Mark out (X) the hours when you have classes or when you are "unavailable" to work

HOURS	Mon	Tues	Wed	Thur	Fri	Sat	Sun
7 am	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 am	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 am	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 am	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 am	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1 pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
After 6 pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**CERTIFICATION**

I certify that the answers I have given in the materials I have submitted in this application for this position are true and correct and that I have not knowingly withheld any facts or circumstances. I understand that all answers given in my application for employment are subject to verification and that should I be employed at the campus, any misrepresentation or omission of facts in this application may be sufficient reason for dismissal. The application materials include this document and any other materials submitted.

**Offers of employment are contingent upon willingness to sign State of California Oath of Allegiance.**

\_\_\_\_\_

Date

\_\_\_\_\_

Applicant's Signature