

# APPLICATION FOR STUDENT EMPLOYMENT

**CONFIDENTIAL**

DATE \_\_\_\_\_  
California State University, San Marcos  
University Police

## Personal Information

### FULL LEGAL NAME

Last	First	Middle Initial
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### OTHER NAMES (nicknames & maiden name) YOU HAVE USED OR BEEN KNOWN BY

### SOCIAL SECURITY NUMBER

1.	2.	3.	
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### RESIDENCE ADDRESS & TELEPHONE NUMBER

Number	Street	City	State	Zip Code
Please list your residence phone and an alternate number for messages.		( )	( )	
		Residence	Message (daytime)	

### PLEASE LIST MAILING ADDRESS IF DIFFERENT FROM RESIDENCE ADDRESS

Number	Street	City	State	Zip Code
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POSITION APPLYING FOR	UNITS ENROLLED IN	DRIVERS LICENSE NUMBER	STATE
Community Service Officer			

### IN CASE OF EMERGENCY, PLEASE NOTIFY:

Last	First	Relationship	Telephone No.
Number	Street	City	State
			Zip Code

Have you ever been convicted of a felony or misdemeanor within the last five years? If so, please attach a brief explanation. Yes  No

## Education

ARE YOU CURRENTLY A: Fresh.  Soph.  Junior  Senior

### PLEASE INDICATE BELOW ALL THE SCHOOLS YOU HAVE ATTENDED BEGINNING WITH HIGH SCHOOL

Name of School	Location of School (city/state)	From Mo./Yr.	To Mo./Yr.
		Major	Units/Degree
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Name of School	Location of School (city/state)	From Mo./Yr.	To Mo./Yr.
		Major	Units/Degree

Continued

## Experience & Employment History

- BEGINNING WITH YOUR MOST CURRENT EMPLOYMENT, PLEASE LIST ALL EMPLOYMENT WITHIN THE LAST TEN YEARS
- (INCLUDING PART-TIME, TEMPORARY, ARMED SERVICES & VOLUNTARY EMPLOYMENT).
- RESUME MAY BE ATTACHED, BUT APPLICATION MUST BE COMPLETED IN FULL.

Date of Employment	Time of Employment		Name & Address of Employer
From	To	Years	
		Months	
Duties:			Phone No.
			Supervisor's Name

### Reason for leaving:

Date of Employment	Time of Employment		Name & Address of Employer
From	To	Years	
		Months	
Duties:			Phone No.
			Supervisor's Name

### Reason for leaving:

Date of Employment	Time of Employment		Name & Address of Employer
From	To	Years	
		Months	
Duties:			Phone No.
			Supervisor's Name

### Reason for leaving:

Name	Name
Address	Address
Phone No.	Phone No.
Professional <input type="checkbox"/> Personal <input type="checkbox"/>	Professional <input type="checkbox"/> Personal <input type="checkbox"/>

## References

	8am to 9am	9am to 10am	10am to 11am	11am to 12 noon	12noon to 1pm	1pm to 2pm	2pm to 3pm	3pm to 4pm	4pm to 5pm	5pm to 6pm	6pm to 7pm	7pm to 8pm	8pm to 9pm	9pm to 10pm
MONDAY														
TUESDAY														
WEDNESDA														
THURSDAY														
FRIDAY														
SATURDAY														
SUNDAY														

I UNDERSTAND THAT ANY APPOINTMENT TENDERED TO ME MAY BE CONTINGENT UPON THE RESULTS OF A THOROUGH BACKGROUND INVESTIGATION. I HEREBY CERTIFY THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE TRUE AND COMPLETE AND I UNDERSTAND THAT ANY DISCREPANCIES, MISSTATEMENTS, OMISSIONS AND/OR FALSIFICATIONS MAY CAUSE MY NAME TO BE REMOVED FROM THE ELIGIBILITY LIST, OR BE CAUSE FOR IMMEDIATE DISMISSAL IF AN APPOINTMENT WAS MADE. I FURTHER UNDERSTAND THAT UPON APPOINTMENT I SHALL BE REQUIRED TO SIGN A CONFIDENTIALITY & PRIVACY STATEMENT. I HAVE READ THE ABOVE STATEMENT, AND PRIOR TO SUBMITTING MY APPLICATION, I HAVE REVIEWED IT CAREFULLY FOR ACCURACY.

Full Signature: \_\_\_\_\_

Date: \_\_\_\_\_