



Date Received _____
CWS _____
Institutional _____

STUDENT EMPLOYMENT APPLICATION

Complete the following information. Please Print.

Name: _____

Student ID #: _____

E-mail address: _____

Address: _____
Street City, State, Zip

Phone Number: () _____

U. S. Citizen? Yes _____ No _____

College Major: _____ Are you an athlete? Yes _____ No _____

Have you ever been employed by Wayland Baptist University? Yes _____ No _____

If yes, when? _____ Which department? _____

Work Experience:

<u>Employer</u>	<u>City</u>	<u>Type of Work</u>	<u>Date(s) worked</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Work Skills or Training:

Computer _____ Typing _____ Multi-line phone _____
Tutoring _____ Other _____

What are your greatest attributes?

What are your major weaknesses?

What type of work do you enjoy doing?

What hours/days are you available to work?

Other concerns/issues:

I certify that all the information provided by me in connection with this application is true and complete, and that any falsification shall be grounds for refusal to hire, or if hired, termination of employment.

I understand that as a condition of my employment I will be required to provide proof of authorization to work in the United States.

I understand that receipt of this application by WBU does not mean that I have been hired or employed by WBU. I understand that this application is not a contract of employment.

Signature: _____ Date: _____

If you have any questions about this application or the opportunity to be a student worker please feel free to contact the work study coordinator at 806-291-3529.