

Student Employment Application Form



Submit this application form to the supervisor in the department to which you are applying.
The department supervisor will contact you if you're selected for an interview.

Application Date _____

Name _____

Address _____

City/State _____ Zip Code _____

Phone # _____ Email _____

During which semester(s) do you want to work?

Academic Year Fall Semester Only Spring Semester Only Summer

Number of hours per week you are willing to work: _____

Will you be receiving Federal Work-Study Financial Aid? Yes No

Course of study/major _____ Number of credits enrolled this semester _____

Have you previously worked for UW-Baraboo/Sauk County? Yes No

If yes, When? _____ For Whom? _____ Department _____

Black out the hours on the table below you are **ARE** able to work. Check: Fall Spring

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
8 a.m.							
9 a.m.							
10 a.m.							
11 a.m.							
Noon							
1 p.m.							
2 p.m.							
3 p.m.							
4 p.m.							
5 p.m.							
6 p.m.							
7 p.m.							
8 p.m.							
9 p.m.							

List current job skills (from training and/or experience)

Employment History (List present or most recent job first)

Employer 1 _____	Phone # _____
Address (City and State) _____	Wage _____
Position _____	Dates of Employment _____
Duties: _____	

Reason for Leaving _____	

Employer 2 _____	Phone # _____
Address (City and State) _____	Wage _____
Position _____	Dates of Employment _____
Duties: _____	

Reason for Leaving _____	

I certify all the information on this application is true, accurate and complete. I understand if I have given false information or omitted any relevant facts, I may be disqualified from employment consideration or discharged immediately from employment upon discovery of such false information or omissions.

Student Signature: _____ Date: _____