

Student Employment Application

General Information

Last Name		First Name		MI	Preferred Name		Pronouns
School/Campus Address				City		State	Zip Code
Permanent Mailing Address				City		State	Zip Code
Primary Phone		Current SSU student?		Available start date:			
List position(s) applying for:		Do you have Federal Work Study?		SSU Student ID#:			
All position descriptions are available on our website.		Yes - \$ _____		Major: _____			
		No		Year in School: _____			
		Already using for another campus job		Expected Grad Date (month/year): _____			
SSU Email Address:				Term applying for: Summer Academic Year Both			
How did you learn of this vacancy (please list the specific employee, website, or other source)?							
Number of hours requested per week?							
Do you have another campus job? If yes, where?							
Have you ever been previously employed by SSU? If yes, list location, title, department and dates:							

Certifications: (CPR/AED, First Aid, Group Exercise, etc...)

Title	Issued By:	Expiration Date:
Title	Issued By:	Expiration Date:
Title	Issued By:	Expiration Date:

Availability: Click time blocks that you cannot work: (i.e. Classes, Jobs, Personal Commitments)

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
6:00-7:00 am							
7:00-8:00 am							
8:00-9:00 am							
9:00-10:00 am							
10:00-11:00 am							
11:00 am-12:00 pm							
12:00-1:00 pm							
1:00-2:00 pm							
2:00-3:00 pm							
3:00-4:00 pm							
4:00-5:00 pm							
5:00-6:00 pm							
6:00-7:00 pm							
7:00-8:00 pm							
8:00-9:00 pm							
9:00-10:00 pm							

Employment History: List current/most recent employer firms

Employer Name	Address	City	State	Zip Code
Telephone Number	Job Title			
Dates of Employment (include start and end dates)	Supervisor's Name and Title			
If you are still employed, may we contact your employer? Yes No				
Summary of duties:				
Reason for leaving:				
Employer Name	Address	City	State	Zip Code
Telephone Number	Job Title			
Dates of Employment (include start and end dates)	Supervisor's Name and Title			
If you are still employed, may we contact your employer? Yes No				
Summary of duties:				
Reason for leaving:				
Employer Name	Address	City	State	Zip Code
Telephone Number	Job Title			
Dates of Employment (include start and end dates)	Supervisor's Name and Title			
If you are still employed, may we contact your employer? Yes No				
Summary of duties:				
Reason for leaving:				

References: Please list two references not related to you

1. Name/Relationship: _____ Phone: _____
2. Name/Relationship: _____ Phone: _____

Related Experience: Do you have any other skills/abilities related to the position for which you are applying?

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts required within this document is cause for my dismissal. I understand that any employment offered is for an indefinite duration, unless otherwise specified in writing, and is "at-will", which means that either I (after a two weeks' notice) or Campus Life and Recreation (following SSU policy) may terminate my employment at any time.

Signature of Applicant: _____ Date: _____

Please return this application with resume to: campusrec@salemstate.edu

Office Use Only

Applicant Emailed Rubric Completed Phone Interview In-Person Interview Offer Made Not Selected
 (Confirmation of Receipt)