

University of Wisconsin-Fond du Lac Student Employment Application

Date: _____ PRISM ID# _____

Name _____ Daytime phone # _____

Address _____ Email _____

City _____ Zip Code _____

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

Academic Year	Fall Semester only	Spring Semester only	Summer
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Will you be receiving Work-Study Financial Aid? Yes No

Please check all departments that you are interested in working for.

Art	Information Technology	Music
Athletics, Fitness Center, PE	Facility Rental Tech	Student Ambassador
Biology	Geography	Student Services
Business Dept Chair Support	History	Theater
Business Office	Library and LSS	University Relations
Chemistry	Maintenance-Custodial	Work Zone

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

Course of study/major _____

Number of credits enrolled this semester _____

Have you previously worked for UW-Fond du Lac?
 Yes No If yes, when? _____

Where _____

Black out the hours you are **NOT** able to work:

Business Office Use Only

Work Study Award Offered _____

Award accepted date _____

Approximate Work Hours Available Per Semester _____
Based on rate of \$7.50 /Hour

Application to: _____ Date _____

Hired Date _____ Not Hired _____

Application to: _____ Date _____

Hired Date _____ Not Hired _____

	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.							

Please complete the reverse side of this form and return it to the Business Office.

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

List Computer Experience

Employment History (List present or most recent job first)

Employer 1 _____ Mo/Yr _____ through _____

Address (City) _____ (State) _____ Wage _____

Duties:

Reason for Leaving _____

Reference (Name) _____ (Position) _____ Phone _____

Employer 2 _____ Mo/Yr _____ through _____

Address (City) _____ (State) _____ Wage _____

Duties:

Reason for Leaving _____

Reference (Name) _____ (Position) _____ Phone _____

Personal Reference (non family member)

Reference Name _____ Phone _____

I certify that information contained in this application is true and complete. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorize the verification of any or all information listed above.

Signature _____ Date _____