CSULB Student Assistant Application

Are you a Federal Work Study student? Are you a Federal Work Study student? Yes No Not Sure	e
Name (Last, First Middle)	Date
Street Address	Student ID Number
City, State, Zip Code	Phone Number
5.5 ₁ , 5.555, 2.p 55.55	
CSULB E-mail Address	Alternate Phone Number
Major	Expected graduation date
Are you presently enrolled at CSULB for 12 or more units? $\ $ Yes $\ $	No
Position(s) applying for:	
Employment History	
Have you worked for any department at CSULB?	If yes, where?
Supervisor's Name Phone N	Number
Reason for leaving	
Are you currently employed? \square Yes \square No	
<u>List most recent first</u>	
Name of employer	Supervisor
Street Address	Phone Number
City, State, Zip Code	Hourly Rate
May we contact?	
	Hours per week
Reason for leaving	
Name of employer	Supervisor
Name of employer	3upc (1/30)
Street Address	Phone Number
City, State, Zip Code	Hourly Rate Hours per week
Reason for leaving	

				Skills					
List office machines,		are or hai	dware, to	ols, vehicle	es, machin	ery, equip	ment, etc.	that are ap	plicable to
the job for which you	ı are applying:								
			Δ	vailability					
How many hours a w	eek are you abl	e to work		,					
Are you willing to wo	•		Yes \square	No	Evenings?	Yes	☐ No		
When are you availal		king?							
·	DIA	aca chack	the bour	s that you	ara availa	blo to wa	ele		
	PR	MON	TUE	WED	THU	FRI	SAT	SUN	
	6 - 7 AM	IVIOIN	TOL	VVLD	1110	1 101	3/1	3011	
	7 - 8 AM								
	8 - 9 AM								
	9 - 10 AM								
	10 - 11 AM								
	11 - 12 PM								
	12 - 1 PM								
	1 - 2 PM								
	2 - 3 PM								
	3 - 4 PM								
	4 - 5 PM								
	5 - 6 PM								
	6 - 7 PM								
	7 - 8 PM								
	8 - 9 PM								
	9 - 10 PM								
	10 - 11 PM								
	11 - 12 AM								
Are you currently au	thorized to wor	k in the Ur	nitad State	ac?	□ _{Yes}	□ _{No}			
If No, please state yo				.5.	163	110			
					V □	N			
Have you ever been				unata abaat	Yes □	No			
If yes, list the circums	stances, piaces,	and dates	on a sepa	irate sneet	<u></u>				
ATTENTION: READ E	BEFORE SIGNIN	G							
Student employees r			20 hours	per week	during the	Fall and S	Spring Sem	nesters.	
I certify that the state									any of the
statements are false,						accurate,	and in the	event that	arry or tile
CICNIATURE						DAT	F		
SIGNATURE						DATI	L		