

Student Employment Application
PURDUE UNIVERSITY FORT WAYNE

Date: _____

Personal Information:

Name: _____ Student ID number: _____
(FIRST) (LAST) (MI)

Telephone: _____ Email: _____

Present Address: _____
(Street) (City) (State) (Zipcode)

U.S. Citizen? Yes No If No, Do You Have a: J-1 visa F-1 Visa

Are you a Purdue University Student or an Indiana University Student? PU IU

Have you been approved & have you accepted work study through financial aid? Yes No

Have you Been Using Your Work Study Award in another department? Yes No

Date Award Accepted: _____ Date First Worked: _____
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Major: _____ Hours Enrolled: _____

Hours of Availability: (Check all that apply)

	8AM	9AM	10AM	11AM	12AM	1PM	2PM	3PM	4PM	5PM	6PM	7PM	8PM	9PM	10PM	11PM
Monday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tuesday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wednesday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Thursday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Friday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Saturday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sunday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Position for which you are applying: _____

Clerical or Technical Skills You Possess: _____

Employment History:

Employer	Dates	Location	Phone	Job Title

In case of a medical emergency, please contact:

Name: _____

Phone: _____

Address: _____

Relationship: _____

Have you ever been convicted of a crime (include courts-material convictions, but exclude traffic violations)

Yes No

If Yes, list date, charge, place, court and action taken _____

If employed, I will be subject to and agree to comply with Policies, rules and regulations of the University and I agree to use safe working techniques and all safety equipment required. I understand that any false statement by me in this application or failure to give any material information requested will be cause for my rejection or dismissal.

I understand that employment in certain positions is conditional upon a review of criminal conviction records. I authorize Purdue University Fort Wayne to request and obtain, through the Indiana State Police, and investigation and report to determine the accuracy of my above answers as to prior criminal convictions, if any.

Applicant's Signature: _____

Date: _____