

Application for Student Employment

Personal Information

Name	Student ID#
Email Address	Phone Number
Major	Year (e.g. Freshman, Sophomore, etc.)
Local Address	
Are you eligible to work in the US? ___Y ___N <i>(Please note: All offers of employment are contingent upon satisfactory proof of your identity and legal right to work in the United States.)</i>	
Are you Work-Study Eligible? ___Y ___N ___Unsure	

Position Applying For

Job Title: _____ Department: _____

Available Start Date: _____

Please **shade in** the times you are **available** to work below:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
8:00							
9:00							
10:00							
11:00							
12:00							
1:00							
2:00							
3:00							
4:00							
Evenings							

Additional Comments: _____

Employment History

Employer: _____	Job Title: _____	
Current Employer? Y / N	Job Description and Responsibilities: _____	Start Date: _____ / _____
May we contact them? Y / N	_____	_____ / _____
Supervisor: _____	_____	End Date: _____
Phone: _____	_____	_____ / _____
Address: _____	_____	
_____	Reason for Leaving: _____	Rate of Pay: _____
_____	_____	\$ _____

Employer: _____	Job Title: _____	
May we contact them? Y / N	Job Description and Responsibilities: _____	Start Date: _____ / _____
	_____	_____ / _____
Supervisor: _____	_____	End Date: _____
Phone: _____	_____	_____ / _____
Address: _____	_____	
_____	Reason for Leaving: _____	Rate of Pay: _____
_____	_____	\$ _____

Employer: _____	Job Title: _____	
May we contact them? Y / N	Job Description and Responsibilities: _____	Start Date: _____ / _____
	_____	_____ / _____
Supervisor: _____	_____	End Date: _____
Phone: _____	_____	_____ / _____
Address: _____	_____	
_____	Reason for Leaving: _____	Rate of Pay: _____
_____	_____	\$ _____

Carroll College provides equal employment opportunities to all employees and applicants for employment and prohibits discrimination and harassment of any type without regard to race, color, religion, age, sex, national origin, disability status, genetics, protected veteran status, sexual orientation, gender identity or expression, or any other characteristic protected by federal, state or local laws.

I certify that the information contained in this employment application is complete, correct and accurate to the best of my knowledge and I understand that any falsifications or omissions may result in denial of employment or dismissal. I authorize Carroll to act as my agent in securing information about me from any person or company without liability to such person or company or to Carroll. If an employment relationship is established, I understand that at any time during the initial twelve-month probationary period, my employment and compensation can be terminated either by myself or by Carroll College with or without notice or cause. In addition, if accepted for employment, I hereby agree to abide by the policies of Carroll College.

Signature: _____ Date: _____