

Governors State University

Student Employment Application

This application must be completed and submitted to Hiring Department for job consideration.

Name _____ GSU ID# _____

Address _____

Phone Number _____ Email address _____

Current Student Status

- Undergraduate
- Graduate
- Doctoral

Major _____

Work Areas of Interest (Check all that apply)

- | | | |
|--|---|---|
| <input type="checkbox"/> Career Service Specialist | <input type="checkbox"/> Laboratory Assistant | <input type="checkbox"/> Office Assistant |
| <input type="checkbox"/> Fitness Room Attendant | <input type="checkbox"/> Library Assistant | <input type="checkbox"/> Student Tutor |
| <input type="checkbox"/> Information Technology | | |

Office Skills (Check all that apply)

- | | | |
|---|---|--|
| <input type="checkbox"/> Answering Phones | <input type="checkbox"/> Data Entry | <input type="checkbox"/> Microsoft Word |
| <input type="checkbox"/> Childcare | <input type="checkbox"/> Filing | <input type="checkbox"/> Tutoring |
| <input type="checkbox"/> Computer Programming | <input type="checkbox"/> Microsoft Excel | <input type="checkbox"/> Typing |
| <input type="checkbox"/> Customer Service | <input type="checkbox"/> Microsoft PowerPoint | <input type="checkbox"/> Web development |
| <input type="checkbox"/> Other _____ | | |

Have you ever worked for GSU Yes No

If yes which department _____

Eligibility Status (Check all that apply)

- U. S. Citizen or Permanent Resident
- International Student eligible to work in the United States

Have you completed a Free Application for Federal Student Aid (FAFSA) for the current academic year? Yes No

Have you been awarded Federal Work Study? Yes No

International Students are not eligible for Federal Work Study.

STUDENTS MUST BE ENROLLED IN SIX (6) OR MORE CREDIT HOURS WHILE EMPLOYED.

I certify that the information provided in this application is true and correct to the best of my knowledge. I agree to abide by the policies and procedures of GSU. Eligibility for Federal Work Study does not guarantee placement in a position. I understand that unless I am given a written contract of employment, my employment will not be guaranteed for any particular duration and I may be separated at any time.

Applicant's Signature _____ Date _____