



# BALL STATE UNIVERSITY

L.A. Pittenger Student Center

### FOR OFFICE USE ONLY

Date Submitted: \_\_\_/\_\_\_/\_\_\_

Interview Date: \_\_\_/\_\_\_/\_\_\_

Interview Time: \_\_\_\_\_ am/pm

## Student Center Staff Application

**Personal Information:** GPA and other personal information will be kept confidential.

Name: \_\_\_\_\_

Preferred Name: \_\_\_\_\_ Polo Size:  S  M  L  XL  2XL  Other \_\_\_\_

BSU ID Number: \_\_\_\_\_ BSU Email: \_\_\_\_\_

Class Level:  Freshman  Sophomore  Junior  Senior  Grad Anticipated Graduation Date: \_\_\_/\_\_\_

### Contact Information:

Primary Phone Number: \_\_\_\_\_

Local/Campus Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Permanent Phone Number: \_\_\_\_\_

Permanent Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### Academic Involvement:

Major(s): \_\_\_\_\_ Minor(s): \_\_\_\_\_

Overall GPA: \_\_\_\_\_ Credit hours expecting to take during Fall 2019 \_\_\_\_\_ Spring 2020 \_\_\_\_\_

### Position Information:

How many hours per week do you wish to work approximately? \_\_\_\_\_

Are you willing to work **late shifts on weekends**?  Yes  No

Are you able to hold employment for the remainder of the current school year?  Yes  No

What date are you available to begin employment? \_\_\_\_\_

**Please attach your yellow "Student Employee Referral" sheet to this completed application.**

**Position Information, Cont.:**

Do you have another student job ON CAMPUS?  Yes  No

If yes, which department(s) do you work? \_\_\_\_\_

If yes, approximately how many hours per week do you work? \_\_\_\_\_

Do you have any job(s) OFF CAMPUS?  Yes  No

If yes, where are you employed (list all)? \_\_\_\_\_

If yes, approximately how many hours per week do you work? \_\_\_\_\_

**Employment History:** *List your most recent or current employer.*

Employer: \_\_\_\_\_ Date(s) Employed from \_\_\_\_\_ to \_\_\_\_\_

Position Held/Title: \_\_\_\_\_

Major Job Responsibilities \_\_\_\_\_

Supervisor's Name and Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact the employer to inquire about your work record?  Yes  No

**Schedule:** *Please indicate the times you are UNAVAILABLE to work.*

Time	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
8-9 a.m.							
9-10 a.m.							
10-11 a.m.							
11-Noon							
12-1 p.m.							
1-2 p.m.							
2-3 p.m.							
3-4 p.m.							
4-5 p.m.							
5-6 p.m.							
6-7 p.m.							
7-8 p.m.							
8-9 p.m.							
9-10 p.m.							
10-11 p.m.							
11-Midnight							
12-1 a.m.							
1-2 a.m.							
2-3 a.m.							

**Application Questions:**

Describe any special interests or abilities you may have: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List all campus activities/organizations you belong to: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What is your idea of good customer service? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List any skills/experiences/strengths you may have that would be beneficial to the job you are applying for:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**This signature authorizes the employer to verify past employment information, grades and class schedule at any time.**

\_\_\_\_\_  
*Authorized Signature* *Date*

**For Administrative Office & Supervisor Use Only:**

Employee Hired-Date: \_\_\_\_\_ Date to Begin Work: \_\_\_\_\_ Position: \_\_\_\_\_  
Job- No.: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Budget Code: \_\_\_\_\_ Last Day of Work: \_\_\_\_\_  
Remarks by Supervisor: \_\_\_\_\_  
\_\_\_\_\_