

Work-Study Application

2007-08

Name: _____ SSN: _____ - _____ - _____

Address: _____

Telephone: (Home) _____ - _____ (Mobile) _____ - _____ Major: _____ State _____ Zip _____

Email address: _____ Expected graduation date: _____

SPECIAL SKILLS: Please check off any skills that you have acquired from the items listed below.

- | | | | |
|---|---|---|---|
| <u>MACHINE SKILLS</u> | | <u>COMPUTER SKILLS</u> | <u>MISCELLANEOUS</u> |
| <input type="checkbox"/> Ten key Adding Machine | <input type="checkbox"/> Typing/Speed _____ WPM | <input type="checkbox"/> WordPerfect | <input type="checkbox"/> Maintenance |
| <input type="checkbox"/> Cash Register | <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Lotus 123 | <input type="checkbox"/> Counseling |
| | | <input type="checkbox"/> Microsoft Word | <input type="checkbox"/> Library Skills |
| | | <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Other: _____ |

Have you previously been employed at STC? Yes _____ No _____

If yes, for what department(s)? _____ Supervisor: _____

Which campus would you like to work on (circle)?

PECAN TECH CTR NAH MID VALLEY STARR CO

Please provide the names and telephone numbers of three NON-RELATIVE REFERENCES. **Application will not be processed if references are incomplete.**

	Name	Title	Phone Number/Alternative Number
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Have you ever pled guilty or pled no contest to a charge? Yes ___ No ___ if yes, describe: _____

Have you ever been convicted of a felony or a misdemeanor? Yes ___ No ___ if yes, describe: _____

If hired, can you present evidence of your U.S. Citizenship or proof of your legal right to live and work in this country? Yes _____ No _____

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY AND INDICATE YOUR UNDERSTANDING AND ACCEPTANCE BY SIGNING IN THE SPACE PROVIDED:

- I certify that all the information provided by me in connection with my application, whether on this document or not, is true and complete. I have not knowingly withheld any information requested on this form which may have bearing on an employment decision. I understand and agree that any misstatement, falsification, or omission of information shall be grounds for refusal to hire or, if hired, termination, regardless of the time elapsed before discovery.
- I certify that the foregoing statements are all given of my own free will.
- I understand that if employed, I will by my acceptance of employment, agree to abide by the rules and regulations of the College and Board of Trustees of South Texas College.
- I understand and agree that my employment with the College is at-will unless I have a written agreement stating otherwise, that is signed by both the authorized official of the College and myself.
- I understand that I will be required within three days of employment to provide documents establishing my identity and employment eligibility as required by the Immigration Reform and Control Act of 1986.
- I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education or any other information they may have, personal or otherwise, with regard to any of the subjects covered by this application, and I release all such parties from all liability from any damages which may result from furnishing such information to you

Applicant Signature

Date

For Office Use Only	
Approved _____ Disapproved _____	OE _____ OFA Initials: _____ WS Eligibility \$ _____ Date: _____
Cumulative GPA: _____	Comments: _____

