



Employment Application

It is the policy of the Associated Students California State University, Northridge, Inc. to provide equal employment opportunity in conjunction with all applicable laws.

PERSONA	L INFORMATIO	ON								
LAST NAME FIRST		Т	MIDDLE		HOME PHON	HOME PHONE		E		
ADDRESS	CITY	CITY STATE ZIP CODE			DAYTIME/M	ESSAGE				
IF YOU ARE UNDER 18 YEARS OF AGE, CAN YOU PROVIDE PRO ELIGIBILITY TO WORK?		N YOU PROVIDE PROOF	F OF YES		NO WORK STUD					
ARE YOU CURRENTLY ENROLLED AT CSUN?			IAJOR	NOR	ALLOCATION AMOUNT: R ANTICIPATED DATE OF GRADUATION					
				ALTERNATE FAMIL			CSUN ID			
CSUN EMAIL		AL	ALTERNATE EMAIL			CSUNT				
		ļ.								
	IENT DESIRED									
POSITION APPLYI	NG FOR (ONE POSITION I	PER APPLICATION ONLY	() - Refer to posted positi	on.						
ARE YOU CURRENTLY EMPLOYED? YES NO IF HIRED, ON WHAT DATE WILL YOU BE ABLE TO WORK?										
AVAILABI	LITY									
	HOURS, SHIFTS, OR DAYS	YOU CANNOT WORK?	IF YES, WHEN?	s □NO W	LL YOU WORK C	VERTIME IF AS	KED? YES	□NO		
PLEASE INDICAT	E THE TIMES YOU ARE	E AVAILABLE FOR WO	ORK EACH DAY OR A	ATTACH AN ALTEI	RNATE SCHED	ULE				
	Sunday	Monday	Tuesday	Wednesday	Thursda	ay Fi	riday	Saturday		
From										
to										
Total available h	nurs ner week									
	ES MAY VARY FROM WEE	K TO WEEK AND OCCAS	SIONALLY EMPLOYEES	ARE ASKED TO ST	ΓΑΥ LATE, LEAVE	EARLY, OR CO	ME IN ON A SCHED	ULE DAY OFF.		
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GENERAL	INFORMATIO	N								
HAVE YOU EVER IF YES WHEN?	WORKED FOR ASSOCIAT	ED STUDENTS AT CALIF WHERE		SITY, NORTHRIDGE	? YES	NO				
DO YOU HAVE A	CURRENT VALID DRIVER'S	SLICENCE? YES	NO							
ARE YOU ABLE TO	PERFORM ALL THE ESS	ENTIAL FUNCTIONS OF	THE JOB YOU ARE AP	PLYING FOR WITH	OR WITHOUT RE	EASONABLE AC	COMMODATIONS?	YES NO		
COMPUTER EXPE	ERIENCE (PLEASE SPECIF	FY SOFTWARE AND HAF	RDWARE):							
							TYPING S	PEED (WPM)		
WHAT ODECIAL C	KILLS OR OTHER QUALIF	ICATIONS DO VOU DOS	OFCO DEL ATED TO THE		DI VINC FOR2					
WHAT SPECIAL S	NILLS OR OTHER QUALIF	ICATIONS DO 100 POS	SESS KELATED TO THE	E JUB TUU ARE API	PLTING FOR?					
IF OFFERED EMP	LOYMENT, CAN YOU PRO	VIDE PROOF OF ELIGIE	BILITY TO WORK IN THE	UNITED STATES F	PRIOR TO START	ING WORK?	YES NO			
	CHECKING YOUR REFER					_	_ _			
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EMPLOYMENT / INTERNSHIP EXPERIENCE

LIST EACH JOB HELD. START WITH PRESENT OR MOST RECENT JOB HELD. INCLUDE MILITARY SERVICE ASSIGNMENTS IF RELEVANT. IF YOU NEED ADDITIONAL SPACE, OR IF YOU WISH TO EXPLAIN THE CIRCUMSTANCES OF YOUR DEPARTURE FROM A PREVIOUS EMPLOYER, PLEASE ATTACH A SEPARATE SHEET. WE MAY CONTACT EMPLOYERS LISTED ON THIS APPLICATION. NOTE REGARDING MILITARY SERVICES: A DISHONORABLE DISCHARGE IS NOT AN ABSOLUTE BAR TO YOU FROM EMPLOYMENT WITH ASSOCIATED STUDENTS CALIFORNIA STATE UNIVERSITY, NORTHRIDGE, INC. OTHER FACTORS WILL AFFECT A FINAL DECISION. DO NOT INCLUDE INFORMATION REGARDING SERVICE IN THE MILITARY OF A FOREIGN COUNTRY.

FROM MO	YR	MO	YR	EMPLOYER'S NAME		
COMPLETE	ADDRESS (STREE	ET NO, CITY, STA	ATE AND ZIP CODE)			
		$\overline{}$		JOB TITLE	IMMEDIATE SUPERVISOR	AREA CODE AND PHONE #
DESCRIPTION	ON OF DUTIES					. L
	. =				_	
REASON FO)R LEAVING					MAY WE CONTACT?
EDOM				TEMPLOVEDIO NAME		
FROM MO	YR	TO MO	YR	EMPLOYER'S NAME		
COMPLETE	ADDRESS (STREET	T NO, CITY, STAT	E AND ZIP CODE)			
				JOB TITLE	IMMEDIATE SUPERVISOR	AREA CODE AND PHONE #
DESCRIPTIO	ON OF DUTIES					
REASON FO	R LEAVING					MAY WE CONTACT?
		1				
FROM MO	YR	TO MO	YR	EMPLOYER'S NAME		
COMPLETE	ADDRESS (STREET	T NO, CITY, STAT	E AND ZIP CODE)			1
				JOB TITLE	IMMEDIATE SUPERVISOR	AREA CODE AND PHONE #
DESCRIPTIC	ON OF DUTIES					
REASON FO	IR LEAVING					MAY WE CONTACT?
FROM		то		EMPLOYER'S NAME		
MO	YR	МО	YR			
COMPLETE	ADDRESS (STREET	T NO, CITY, STAT	E AND ZIP CODE)			
				JOB TITLE	IMMEDIATE SUPERVISOR	AREA CODE AND PHONE # ()
DESCRIPTIC	ON OF DUTIES					
REASON FO	R LEAVING					MAY WE CONTACT?

RELEVANT VOLUNTEER EXPERIENCE / COURSEWORK
LIST ANY RELEVANT VOLUNTEER EXPERIENCE AND/OR COURSEWORK INCLUDING CERTIFICATIONS. IF YOU ARE APPLYING FOR THE CHILDREN'S CENTER, PLEASE ATTACH A LIST OF ALL CHILD DEVELOPMENT/EARLY CHILDHOOD EDUCATION CLASSES THAT YOU HAVE COMPLETED.
VOLUNTEER EXPERIENCE (INCLUDE DATES AND LOCATIONS WHERE APPLICABLE):
COURSEWORK / CERTIFICATIONS (PLEASE INCLUDE DATE OF COMPLETION AND LOCATION):
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PLEASE READ AND SIGN BELOW
I hereby certify that the information contained in this application form is true and correct to the best of my knowledge and agree to have any of the statements checked by Associated Students California State University, Northridge, Inc. unless I have indicated to the contrary. I authorize the references listed above to provide Associated Students California State University, Northridge, Inc. with any and all information concerning my previous employment and any pertinent information that they may have. Further, I release all parties and persons from any and all liability for any damages that may result from furnishings such information to Associated Students California State University, Northridge, Inc. as well as from the use or disclosure of such information by Associated Students California State University, Northridge, Inc. or any of its agents, employees, or representatives. I understand that any misrepresentation, falsification, or material omission of information on this application may result in my failure to receive an offer or, if I am hired, in my dismissal from employment.
I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future. I understand that employment with Associated Students California State University, Northridge, Inc. is "at will" meaning that the terms and conditions of employment may be changed with or without notice, with or without cause, including, but not limited to, termination, demotion, promotion, compensation, benefits, duties, and location of work. I understand that no representative of Associated Students California State University, Northridge, Inc. has the authority to make assurances to the contrary.

APPLICANT'S SIGNATURE _____ DATE ____