

Testing Programs and Services

EMPLOYMENT APPLICATION

We appreciate the time you spend filling in this application; all portions must be completed. We use this information to help us make the best possible placement in the Testing Center. Kansas State University actively seeks diversity among its employees and is an affirmative action/equal opportunity employer of individuals with disability and protected veterans. Please answer each question completely and accurately.

APPLICANT INFORMATION									
Last Name			First			M.I.		Date	
Street Address						Apartment/Unit #			
City			State			ZIP			
Phone			E-mail Address						
Date of Birth		Major/Year:			Student ID No.				
Position Applied for									
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Have you worked on campus before?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?					
Are you eligible to receive work study?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, list total hours					
EDUCATION									
High School			Address						
From	To	Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree			
College			Address						
From	To	Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree			
Other			Address						
From	To	Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree			
REFERENCES									
<i>Please list three professional references.</i>									
Full Name			Relationship						
Company					Phone				
Address									
Full Name			Relationship						
Company					Phone				
Address									
Full Name			Relationship						
Company					Phone				
Address									

PREVIOUS EMPLOYMENT

Company		Phone	
Address		Supervisor	
Job Title			
Responsibilities			
From	To	Reason for Leaving	

May we contact your previous supervisor for a reference? YES NO

Company		Phone	
Address		Supervisor	
Job Title			
Responsibilities			
From	To	Reason for Leaving	

May we contact your previous supervisor for a reference? YES NO

SKILLS AND ABILITIES

Computer Skills	Check all that apply			Foreign Languages	
MS Word	MS EXCEL	MS PowerPoint	MS Publisher	Yes	No
Other Skills and Abilities					

Availability (Schedule) In the grid below place an **X** for all days/hours you are available to work.

Day of the Week	8:00 a.m.	9:00 a.m.	10:00 a.m.	11:00 a.m.	12:00 p.m.	1:00 p.m.	2:00 p.m.	3:00 p.m.	4:00 p.m.	5:00 p.m.	6:00 p.m.
Mon											
Tues											
Wed											
Thurs											
Fri											
Sat											

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.
 If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature:

Date: