

FEDERAL WORK-STUDY EMPLOYMENT APPLICATION

Prospective **Federal Work-Study** employees will receive consideration without regard to race, religion, color, sex, age, national origin, handicap, marital or veteran status, sexual orientation, or non-job related medical condition.

North Central State College is an **Equal Opportunity/ADA Employer. M/F/V/D**

Work-Study earnings may impact eligibility for unemployment compensation benefits. Consult your Ohio JFS Office if you are receiving unemployment benefits to learn how participating in FWS may affect you.

**\*Required documentation:** Driver's License AND Social Security Card or Passport or Birth Certificate\*

- Please print *legibly* in dark ink -

**APPLICANT**

Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Number Street City State Zip

Telephone (\_\_\_\_\_) \_\_\_\_\_ Social Security Number \_\_\_\_\_

Academic major \_\_\_\_\_ Anticipated Graduation Date \_\_\_\_\_

Skills Inventory:

- |   |  |   |  |
|---|--|---|--|
| <input type="checkbox"/> Switchboard      | <input type="checkbox"/> Child Care          | <input type="checkbox"/> Microsoft Word | <input type="checkbox"/> Painting          |
| <input type="checkbox"/> Telephone Skills | <input type="checkbox"/> Customer Service    | <input type="checkbox"/> Excel          | <input type="checkbox"/> Power Tools       |
| <input type="checkbox"/> Filing           | <input type="checkbox"/> Computer Technician | <input type="checkbox"/> PowerPoint     | <input type="checkbox"/> Sports Background |
| <input type="checkbox"/> Other _____      |  |   |  |

When can you work?  Day  Night  Both

**EDUCATION**

High School \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Year graduated or GED received \_\_\_\_\_ Accumulative GPA \_\_\_\_\_

Colleges attended *including NC State*

College \_\_\_\_\_ Major \_\_\_\_\_

Hours earned \_\_\_\_\_ Accum GPA \_\_\_\_\_ Degree earned \_\_\_\_\_ Year last attended \_\_\_\_\_

College \_\_\_\_\_ Major \_\_\_\_\_

Hours earned \_\_\_\_\_ Accum GPA \_\_\_\_\_ Degree earned \_\_\_\_\_ Year last attended \_\_\_\_\_

**REFERENCES** — Provide the names, addresses, and phone numbers for three persons not related to you or your previous employment.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

## EMPLOYMENT

Begin with your most recent position. Include jobs held at NC State. You may include military service and volunteer activities.

Employer \_\_\_\_\_ Phone \_\_\_\_\_ Dates employed from \_\_\_\_\_ to \_\_\_\_\_  
Address \_\_\_\_\_ Job title \_\_\_\_\_  
Work performed \_\_\_\_\_  
Supervisor \_\_\_\_\_ Reason for leaving \_\_\_\_\_

Employer \_\_\_\_\_ Phone \_\_\_\_\_ Dates employed from \_\_\_\_\_ to \_\_\_\_\_  
Address \_\_\_\_\_ Job title \_\_\_\_\_  
Work performed \_\_\_\_\_  
Supervisor \_\_\_\_\_ Reason for leaving \_\_\_\_\_

Employer \_\_\_\_\_ Phone \_\_\_\_\_ Dates employed from \_\_\_\_\_ to \_\_\_\_\_  
Address \_\_\_\_\_ Job title \_\_\_\_\_  
Work performed \_\_\_\_\_  
Supervisor \_\_\_\_\_ Reason for leaving \_\_\_\_\_

Describe specialized training, apprenticeships, skills, and extra-curricular activities \_\_\_\_\_

Have you made contact with a department at the College about being hired?  Yes  No

**If Yes**, did the departmental supervisor say he/she had a job for you?  Yes  No

Department: \_\_\_\_\_ Supervisor's name: \_\_\_\_\_

**If No**, list, in order of preference, the departments or positions in which you like to work, to answer "any" is not acceptable:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

## ELIGIBILITY

Work-Study is a type of federal student aid. Applicants must meet federal aid qualifications in order to be employed in a work-study position. Those who cease to be employed in work-study do not gain eligibility for unemployment compensation benefits. However, becoming employed in a work-study position may affect eligibility for unemployment benefits currently received. Those receiving unemployment benefits should contact Jobs & Family Services prior to applying for work-study.

## CERTIFICATION

I understand that this document is an application; it is not, and is not intended to be, a contract of employment.

I certify that all information entered on this application is true and complete to the best of my knowledge.

Should I be hired by the College, I will abide by all rules and regulations of the College.

I understand that I may be discharged from employment at the College if it determines that I made, or knowingly allowed others to make, false or misleading statements on this application or as part of the hiring process.

Applicant signature \_\_\_\_\_ Date \_\_\_\_\_

## BACKGROUND CHECK RELEASE

I authorize North Central State College and entities employed by the College to conduct whatever background checks as the College deems necessary including, but not limited to, a search of previous employers, personal references, and records of arrest and conviction, to conduct a review and investigation of me in connection with my prospective employment. I release the College, and entities employed by the College to conduct such investigation, from any and all liability which may arise as a result of such investigation or the disclosure of investigative findings.

Applicant signature \_\_\_\_\_ Date \_\_\_\_\_ Date of Birth \_\_\_\_\_

## PERSONAL DATA RECORD

As a public educational institution, North Central State College must comply with federal government regulations and affirmative action responsibilities. To ensure the legality and fairness of its employment and hiring practices, the College is required to obtain and report to federal agencies certain information regarding its job applicants. We ask that you help us adhere to the federal government's record keeping and reporting requirements by completing this *personal data record*. Submission of information is voluntary and your cooperation is much appreciated.

The information requested here is for *periodic government reporting only* and in no way will it be used as a part of the hiring process. It will be kept in a CONFIDENTIAL file, separate from the rest of the employment application.

Applicants for employment at the College are considered for positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, medical condition or disability.

### ***Please Print***

Name \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_  
Last First Initial Area Code

Address \_\_\_\_\_  
Number & Street City State Zip

Check one:  Male  Female

Check the one which best identifies your racial/ethnic group:

White  Black  Hispanic  American Indian/Alaska Native  Asian/Pacific Islander

Check if any of the following apply to you:

Vietnam Era Veteran  Disabled Veteran  Handicapped Individual

**Return to the NC State Financial Aid Office**

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## OFFICE USE ONLY

I-9 by \_\_\_\_\_ Date \_\_\_\_\_ Award: Year \_\_\_\_/\_\_\_\_ \$ \_\_\_\_\_