



# CALIFORNIA STATE UNIVERSITY, LOS ANGELES STUDENT EMPLOYMENT APPLICATION

To be eligible for employment you must be enrolled at least part-time and maintain the minimum GPA.  
For more information about eligibility and how to apply, visit [calstatela.edu/careercenter/campusjobs](http://calstatela.edu/careercenter/campusjobs).

**Complete, save and upload an application to Handshake for each job you apply for.**  
Fields marked (\*) are required.

* DATE	* JOB TITLE	* DEPARTMENT

PERSONAL INFORMATION			
* Name <i>Last</i>	First	Middle Initial	* CIN
Address <i>Number &amp; Street</i>		Unit #	City
			Zip code
Cell Phone		Alternate Phone	E-mail
Are you over 18 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If no, a work permit may be required at time of hire.</i>			
If hired, can you provide evidence that you are legally authorized to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No			
* Do you have any existing CSU employment including UAS, ASI or U-SU? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, how many hours of work per week?</i>			
If you are related to anyone employed by Cal State LA, please provide the following:			
Name		Relationship	Department

EDUCATION					
Post-Secondary Education	Major/Career Goal	From Mo/Yr	To Mo/Yr	Degree? Y/N	Last Term GPA
* California State University, Los Angeles					
* In how many units are you currently enrolled?		Academic Level <input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/> Graduate			

SKILLS	
Valid Licenses/Certificates	
Keyboarding WPM	Office Machines
Computer Programs	
Languages <i>Spoken</i>	<i>Read</i> <span style="margin-left: 100px;"><i>Written</i></span>

EMPLOYMENT INFORMATION			
List current position first			
(Include full-time, part-time, cooperative education, internships, volunteer, summer work and any military service.)			
Employer <i>Name, City &amp; Phone Number</i>			
Position Title	Hrs/Wk	From Mo/Yr	To Mo/Yr
Reason for leaving			
Job Duties			

*Continues*

**EMPLOYMENT INFORMATION** (Continued)Employer *Name, City & Phone Number*

Position Title	Hrs/Wk	From Mo/Yr	To Mo/Yr
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Reason for leaving

Job Duties

Employer *Name, Address & Phone Number*

Position Title	Hrs/Wk	From Mo/Yr	To Mo/Yr
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Reason for leaving

Job Duties

*You may attach a résumé and other additional documentation to this application.*May we contact your current supervisor?  Yes  No

If employed under other name(s), please list:

Supervisor name &amp; phone

Have you ever been discharged from any position(s)?  Yes  No If yes, please explain:**CLASS SCHEDULE**(Mark the times that you are **NOT AVAILABLE TO WORK**)

DAY	8-9	9-10	10-11	11-12	12-1	1-2	2-3	3-4	4-6	6-8	AFTER 8
Monday											
Tuesday											
Wednesday											
Thursday											
Friday											
Saturday											
Sunday											
Are you available to work a night shift if required?	<input type="checkbox"/> Yes <input type="checkbox"/> No					Are you available to work weekends?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Are you available to work a graveyard shift if required?	<input type="checkbox"/> Yes <input type="checkbox"/> No					If required, do you have a valid CA driver license?	<input type="checkbox"/> Yes <input type="checkbox"/> No				

**ADDITIONAL INFORMATION**

Briefly describe your qualifications for the position by virtue of your education, experience and/or interest.

Activities (including honors, clubs, sports, hobbies, etc.)