

**MORGAN STATE UNIVERSITY ~ STUDENT EMPLOYMENT APPLICATION**

**SOC SEC #**

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**STUDENT ID #**

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**TO BE COMPLETED BY STUDENT \*Complete Application in Full.\* An Incomplete Application will not be considered.  
\*All Bold Sections must be completed in Full\***

LAST NAME FIRST NAME MI

PERMANENT ADDRESS (PLEASE INCLUDE CITY, STATE, ZIP CODE):	TELEPHONE #: (    )    -	REQUESTING AID FOR: <input type="checkbox"/> ACADEMIC YEAR
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LOCAL ADDRESS (PLEASE INCLUDE CITY, STATE, ZIP CODE):	TELEPHONE #: (    )    -	<input type="checkbox"/> FALL SEMESTER ONLY  <input type="checkbox"/> SPRING SEMESTER ONLY
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MAJOR:	CLASSIFICATION:	EMAIL:
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LIST JOB INTEREST (RESUME MUST BE ATTACHED):

HAVE YOU BEEN EMPLOYED BY MSU IN ANY CAPACITY? <input type="checkbox"/> YES _____ WHERE & WHEN _____ <input type="checkbox"/> NO	WILL YOU HAVE ACCESS TO A CAR? <input type="checkbox"/> YES <input type="checkbox"/> NO	WHAT DATE ARE YOU AVAILABLE TO WORK?
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PROGRAM(S) INTEREST:	<input type="checkbox"/> FEDERAL WORKSTUDY (FWS)	<input type="checkbox"/> TUTORIAL (TU)	<input type="checkbox"/> COMMUNITY SERVICE (CS)	<input type="checkbox"/> CAMPUS EMPLOYMENT (CE)
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PLEASE INDICATE THE HOURS YOU ARE AVAILABLE TO WORK (PLEASE DO NOT INCLUDE SCHEDULED CLASS HOURS).

	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
MORNING							
EVENING							

I AGREE THE INFORMATION PROVIDED ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT APPLICATIONS ARE PROCESSED ON A FIRST-COME BASIS. EMPLOYMENT IS NOT GUARANTEED AND I MUST MEET EMPLOYMENT ELIGIBILITY WITH THE STUDENT WORK PROGRAMS.

STUDENT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**TO BE COMPLETED BY EMPLOYER**

DEPT AGENCY NAME :	TELEPHONE #:	E-MAIL:
BUDGET CODE:	FAX #:	
LOCATION:		

EMPLOYMENT TYPE::	<input type="checkbox"/> FEDERAL WORKSTUDY (FWS)	<input type="checkbox"/> AMERICA CHALLENGES (AC)	<input type="checkbox"/> COMMUNITY SERVICE (CS)	<input type="checkbox"/> CAMPUS EMPLOYMENT (CE): \$ _____ AWARD & \$ _____ PAY RATE
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REQUESTED CONTRACT PERIOD: <input type="checkbox"/> ACADEMIC YEAR <input type="checkbox"/> FALL ONLY <input type="checkbox"/> SPRING ONLY	REQUESTED HRS PER WEEK:	POSITION TITLE:
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I HAVE INTERVIEWED THE ABOVE APPLICANT AND I AM SUBMITTING THIS APPLICATION FOR STUDENT EMPLOYMENT CONSIDERATION.

SUPERVISOR'S SIGNATURE (PRINT NAME FIRST) \_\_\_\_\_ DATE \_\_\_\_\_

VP/CHAIR/DIRECTOR'S SIGNATURE (PRINT NAME FIRST) \_\_\_\_\_ DATE \_\_\_\_\_

**TO BE COMPLETED BY STUDENT EMPLOYMENT OFFICE**

CONTRACT #:	TOTAL HRS PER WEEK:	PAY RATE: \$	AWARD AMOUNT: \$	TYPE OF EMPLOYMENT:	STATUS: <input type="checkbox"/> APPROVED <input type="checkbox"/> PENDING <input type="checkbox"/> DENIED
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EFC: Unmet Need:	CONTRACT STARTING DATE:	CONTRACT ENDING DATE:	INITIALS	DATE:
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COMMENTS:

**ACADEMIC YEAR**

