

# Wright State University

## Student Employment Application Form

Questions? Email [studentemployment@wright.edu](mailto:studentemployment@wright.edu)

- You must first **Save As**
  - Use file name: SEApplicationForm-[SemesterNameYear]-[YourFirstNameLastName]
- In the newly saved file, enter information in fields on all pages of this form.
- Save changes you made to the newly saved file.
- Upload the file to Handshake as Other Document.
- Submit to hiring department if requested in application instructions in the job posting.

### Student Information:

University ID: \_\_\_\_\_ wright.edu email address: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Phone Number: \_\_\_\_\_  
Include Area Code

### Student Work Availability:

\*Student's desired number of work hours/week \_\_\_\_\_ - Must not exceed maximum allowed:

***\*There are upper limits on the total number of hours a student employee may work each week, in all jobs combined.***

The work week begins on Saturday and ends on the following Friday. Students and supervisors must know the limits and avoid violations. Violations lead to termination. Upper limits on total work hours per week vary by a combination of factors.

Refer to the detailed information on the Student Employment pages at <http://www.wright.edu/human-resources>.

	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday
Start and end times for classes on this day for the semester							
Range of hours available to work this day. Example: 10am-1pm; 2:30pm-4:30pm							

Please indicate if you are available to work the following Check *all* that apply:

Summer Semester ☐  
Weekends ☐

Winter Break ☐  
Mornings prior to 8:30 a.m. ☐

Spring Break ☐  
Evenings after 5:00 p.m. ☐

General Office Skills:

Computer/Software/Technical/Lab Skills:

Class Level: \_\_\_\_\_ Major: \_\_\_\_\_ Cumulative GPA: \_\_\_\_\_

If 1st semester, may not be applicable.

Have you ever previously worked as a Wright State student employee? Yes No

Did you receive a Federal Work-Study award for your financial aid? Yes No

\*\*If Yes, have you accepted the Federal Work-Study award? Yes No

*\*\*To use the award for student employment wages,  
you must first accept the award in your financial aid package.*

Federal Work-Study Award amount = \$ \_\_\_\_\_

Access your Financial Aid Award Notices online via [wings.wright.edu](http://wings.wright.edu) > WINGS Express.

***Employment and/or Volunteer History*** (begin with most recent experience).

Dates Employed/Volunteered (mm/dd/yyyy): \_\_\_\_\_ to \_\_\_\_\_

Company/Organization Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_  
Include Area Code

Job Title: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

Duties:

Reason for leaving: \_\_\_\_\_

\*\*\*\*\*

Dates Employed/Volunteered (mm/dd/yyyy): \_\_\_\_\_ to \_\_\_\_\_

Company/Organization Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_  
Include Area Code

Job Title: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

Duties:

Reason for leaving: \_\_\_\_\_

\*\*\*\*\*

Dates Employed/Volunteered (mm/dd/yyyy): \_\_\_\_\_ to \_\_\_\_\_

Company/Organization Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_  
Include Area Code

Job Title: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

Duties:

Reason for leaving: \_\_\_\_\_

\*\*\*\*\*

When submitting this application electronically, I understand that my typed name serves as my signature. I certify that all statements in this application are true and accurate. I understand that making false statements is reason for being denied employment or for having my employment terminated.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

*Optional* text box on next page for additional relevant information.

Updated 2024-08-23

This page provides the option to include additional information about answers on previous pages or other information relevant to the questions on the form.

Adding information on this page is *optional*.