



## **RE: FALL 2018 Semester Student Employment**

We are beginning to schedule student employees for the upcoming FALL 2018 semester. If you would like to be considered for employment, please provide the hours you are available to work.

Regular Hours are Monday-Thursday 8AM-6PM, Friday 8AM-4PM, Saturday 11AM-3PM and Sunday 12:00pm - 4:00pm.

NAME:	
Day of Week	Hours You Can Work (Training week) August 13 <sup>th</sup> – 17 <sup>th</sup>
Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
Saturday	
Sunday	
Rush Availability:	Hours You Can Work starting Monday August 20th
Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
Saturday	
Sunday	

110 W. Rosedale Ave Sykes Union, Ground Fl. West Chester, PA 19383



Phone: 610-436-2242 Fax: 610-436-2287 www.wcucampusstore.com

## **Pre-Employment Questionnaire Equal Opportunity Employer**

## **Employment Application**

Applicant Information						
Full Name:	Last	First			Date	e:
	Lasi	1 1150			IVI.1.	
Address:	Street Address					Apartment/Unit #
	Oli Cot Addi Coo					лраннын онк <del>н</del>
	City				State	ZIP Code
Phone:		E	mail			
Date Availal	ble:					
Position App	olied for:					
Referred By						
		Educa	ition			
High Schoo	l:	Address:_				
From:	To:	Did you graduate?	YES	NO	Diploma::	
College:		Address:				
From:	To:	Did you graduate?	YES	NO	Degree:	
Please list	three persons not re	elated to you, whom you hav	ve kno	wn at le	east one year.	
Full Name:					Relationship:_	
Company:					Phone:_	
Address:						
Full Name:					Relationship:	
Company:					Phone:_	
Address:						
Full Name:					Relationship:_	
Company:					Phone:	

Address:							
	Previous Employers						
Company: Address:		Phone:Supervisor:					
Job Title:	Starting Salary:	Ending Salary:					
Responsibil	ities:						
From:	To: Reason for Leaving:_						
May we cor	YES NO latact your previous supervisor for a reference?						
Company: Address:		Phone:Supervisor:					
Job Title:	Starting Salary:	Ending Salary: <u>\$</u>					
Responsibil	ities:						
From:	To: Reason for Leaving:_						
May we cor	YES NO ltact your previous supervisor for a reference?						
Company:		Phone:					
Address:		Supervisor:					
Job Title:	Starting Salary:	Ending Salary:					
Responsibil	ities:						
From:	To: Reason for Leaving:_						
May we cor	YES NO tact your previous supervisor for a reference?						
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:					