

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



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

RE: Spring 2020 Semester Student Employment

We are beginning to schedule student employees for the upcoming Spring 2020 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 & Sunday 11:00am – 3:00pm

NAME: _____

<u>Day of Week</u>	<u>Hours You Can Work</u>
Monday	_____
Tuesday	_____
Wednesday	_____
Thursday	_____
Friday	_____
Saturday	_____
Sunday	_____

The first week of the semester we are open until 8:00 pm Monday - Thursday.
The second week of the semester we are open until 7:00 pm Tuesday - Thursday.

Are you available to work extended hours the first two weeks of class?

YES _____ NO _____

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Student Services, Inc. is an equal opportunity employer.

Regular Hours:

Monday-Thursday: 8AM-6PM
Friday: 8AM-4PM
Saturday and Sunday: 11AM-3PM

Today's Date: _____

Employment interest:

Summer Fall

Applicant Information

Full Name: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ *City State ZIP Code*

Phone: _____ Email _____

Are you 18 years of age or older?: Yes: No:

College (select one): Undergraduate: Graduate: Anticipated Year of Graduation: _____

References

Please list three persons not related to you, whom you have known at least one year.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Previous Employers

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference? YES NO

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: _____