



WCU CAMPUS STORE

Support the store that supports you
Powered by Student Services Inc

110 W. ROSEDALE AVE, WEST CHESTER, PA 19383

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WWW.WCUCAMPUSSTORE.COM

RE: Fall 2017 Semester Student Employment

We are beginning to schedule student employees for the upcoming **Fall 2017** 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, and Saturday 11AM-3PM

<u>Day of Week</u>	<u>Hours You Can Work</u>
Monday	_____
Tuesday	_____
Wednesday	_____
Thursday	_____
Friday	_____
Saturday	_____
Sunday	_____
<i>Ram Shop</i>	_____
<i>Sat (10:00-5:30)</i>	_____
<i>Sun (11:00-5:00)</i>	_____

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 7pm Tuesday-Thursday.

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

Yes _____ No _____

Employment Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Date Available: _____ Desired Salary: \$ _____

Position Applied for: _____

Referred By: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

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: _____