ON-CAMPUS EMPLOYMENT APPLICATION



Name (Last, First)	Phone	Phone		Year in College	
Student ID # Alternate Pho		e Phone	Major		
E-mail Address	Under 18? (Y/N)		Semester GPA_	Cumulative GPA	
			Schedule of Availability		
Local Address (City, State, Zip)_			Day	Time	
Permanent Address (City, State, Zip)			Monday		
Position applying for			Tuesday		
Have you ever received Work/	Study funding from the Financ	Wednesday			
Employment History: UW-Milwau Start Date End Date_ Duties:	Job Title:		Thursday		
Reason for Leaving:			Friday 		
Employment History: Off Campu	2		Saturday		
		Employer:	Sunday		
Duties: Reason for Leaving: References:			— — Willing to work holidays	?(Y/N)	
			Desired hours/week?		
Name:	Phone Number:	Email Address:	Relation:		
Name:	Phone Number:	Email Address:	Relation:		
2. The individual must b a. an accredited inst d. a high school. 3. Semester Eligibility – Summer eligibility is th following semester may Students who withdraw Summer Eligibility – Any studen or is enrolled during the summen	e enrolled for academic credictivation of higher learning granting A student may not be employed e only exception (see below). Stranger of the semester of the semester of the has been accepted for fair is eligible for summer student the stranger of the student hourly ont; Drug-Free Work Place Act of	employment at UW-Milwaukee and	n educational institution is defi a technical college; c. a vo day of the student's first seme an academic semester and wil last payroll calendar day of th employment as of the date of e fall semester after completion	cational or trade school; or ester of enrollment. I not be enrolling in the e completed semester. withdrawal. on of the spring semester,	
., 5	•	int employment and immediately no	tify my supervisor		
**I understand and accept the paid positions I hold on camp	at I am permitted to work no	more than 25 hours per week demic year. ** Work Study hou	during the academic year	_	
STUDENT SIGNATURE			DATE		