

Employment Application

Department of Campus Recreation



Position Applying For: _____ Available to Start: _____
Please fill out one application per position for which you are applying

Name: _____ CWID: _____ Date: _____
Last First MI

Major: _____ Year: _____ Expected Graduation Date: _____
Give only Local Address or Campus Residence

Local Address: _____
Street City State Zip

Campus Residence: _____
Campus Residence Box Number Room Extension

Mobile Phone: _____ E-mail: _____

University Status: Freshman Sophomore Junior Senior Graduate
 Faculty Staff Crest Associate Other: _____

Affiliation: SOL SPP GSBM GSEP Seaver

Please answer the following questions:

I have: Federal Work Study Pepperdine Work Program Neither

I am willing to work nights and weekends: Yes No

I intend to work multiple jobs this year: Yes No

I have a valid driver's license: Yes No State _____ Type _____

I can provide proof of age at time of employment: Yes No

I am a U.S. citizen: Yes No*

*If No, please inquire at International Student Services on the second floor of the TAC about attaining a job at Pepperdine.

Have you ever been convicted for any offense other than minor traffic violations?
 Yes* No *If Yes, please explain _____

Certifications and Expiration Dates:

Exp. Date	Exp. Date	Exp. Date
_____ CPR	_____ First Aid	_____ Personal Trainer
_____ CPR/FPR	_____ Fitness Instructor	_____ Title XXII
_____ EMT	_____ Lifeguard Training	_____ WSI
Other: _____		

Please list two references: (at least one professional)

Name: _____ Relationship: _____ Phone #: _____

Name: _____ Relationship: _____ Phone #: _____

(Please continue on back)

Please list your previous work experience starting with the most recent:

Employer/ Department	Position(s) Held	Duties Assigned	Reason(s) for Leaving	Dates of Employment
1.				
2.				
3.				

I am available to work: Fall Semester Winter Break Summer
(Check all that apply) Spring Semester Spring Break Other: _____

Availability:

Please write in **ALL AVAILABLE** times to work (available working hours include 6AM to midnight):

Time	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
AM							
PM							

Total Hours Available to Work: _____

Signature: _____ Date: _____

For Office Use Only:

Date Turned In: _____	Name of Employee Receiving Application: _____
Date Hired: _____	Rate of Pay at Hire: _____
W-4/I-9: _____	Interview Date: _____
Status of Application: <input type="checkbox"/> Not Selected for Interview	<input type="checkbox"/> Placed in Pool <input type="checkbox"/> Not Placed in Pool <input type="checkbox"/> Hired
Reason for Non-Selection: <input type="checkbox"/> Did not meet minimum criteria	<input type="checkbox"/> Could not be contacted
<input type="checkbox"/> Not Interested	<input type="checkbox"/> Other: _____