

Imperial Community College District
380 East Aten Road, Imperial, CA 92251

STUDENT EMPLOYMENT APPLICATION

Instructions: The information you enter on this form will be used to determine your eligibility for employment with the Imperial Community College District. All sections of this application must be completed. Please print legibly or type.

POSITION: (List exactly as it appears on job announcement) _____

Part I - Applicant Information

A. Name: _____
Last First Middle

B. Address: _____
Street City State Zip Code

C. Contact Telephone Number: () _____ Email: _____

D. Emergency Contact Name: _____ Telephone Number: () _____

E. Other names you have used in employment/education: _____

F. Date you are available for work: _____

G. Can you legally work in the United States? Yes No (Proof of citizenship or immigration status will be required upon employment.) If under age 18, do you have an Imperial County Work Permit Yes No

Part II - Educational History and Qualifications

Are you an active student at Imperial Valley Community College or do you intend to enroll

State highest level of education completed: _____ Year: _____

School: _____ Location: _____

A. Other trade, technical, business, or military courses: _____

B. IVC Major or Certificate _____ Job Preference _____

C. Job Skills: (Check all that apply)

Typing Speed General Office Skills Computer Skills Customer Service Teacher Aide

D. List any additional relevant job skills or experience that may qualify you for this position:

List all languages you are fluent in:

_____ Speak Write Read

_____ Speak Write Read

_____ Speak Write Read

Part III - Employment History

List the last 5 years of employment history, including periods of military service. Attach a separate sheet of paper for additional employers

A. Employer: _____ Address: _____

City/State/Zip: _____ Telephone: () _____

Job Title: _____ Supervisor: _____

Dates Employed: From: _____ (mo. /yr.) To: _____ (mo. /yr.)

Description of job duties: _____

Reason for leaving: _____

B. Employer: _____ Address: _____

City/State/Zip: _____ Telephone: () _____

Job Title: _____ Supervisor: _____

Dates Employed: From: _____ (mo. /yr.) To: _____ (mo. /yr.)

Description of job duties: _____

Reason for leaving: _____

Part IV - References

Name	Present Address	Telephone Number
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_____	_____	_____
_____	_____	_____
_____	_____	_____

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I hereby release from any liability all persons and organizations furnishing such information requested by the District. I understand that I will be subject to discharge if any statement in this application is found to be false or misleading. I understand that student employment does NOT constitute "employment" for purposes of Unemployment Insurance coverage under the provisions of Section 642 of the UI Code.

Signature of Applicant: _____ Date: _____