

UNIVERSITY OF RICHMOND STUDENT EMPLOYMENT APPLICATION

Today's Date:	
Department to Which You Are Applying:	
Personal Information:	
Name:	UR ID:
Local Address:	Email Address:
Local Phone #: Best Time(s) to Call:	
Rgto cpgpvAddress:	
Rgto cpgpv'Phone #:	<u> </u>
Emergency Contact:	Phone #:
Intended Major:	Minor:
Approximate GPA: Expected Graduation	Date:
Term(s) Applying For: Fall □ Spring □ Summer □	Date Available:
Number of Hours You Are Available to Work (per week):	Do you have a valid driver's license? Yes \Boxed No \Boxed
Are you eligible for Federal Work Study as part of your financial	aid award? Yes □ No □
Have you ever been convicted of a felony? Yes \square No \square (If y	es, please attach a full explanation of the circumstances.)
Are you a varsity student-athlete? Yes \square No \square (If yes, plea employment <i>must</i> notify the Director of Compliance in the Athleti	
Please list your computer skills and software package knowledge:	
Previous Work Experience: In chronological order, list jobs you have held beginning with the	most recent first. Include internships and jobs without pay
Attach another sheet if necessary.	nost recent first. Include internsings and jobs without pay.
ON-CAMPUS Employment	
Job Title: Depar	rtment:
Supervisor: Da	tes Employed:
Paid Job? Yes □ No □ Internship?	Yes □ No □
Job Title: Depart	rtment:
	tes Employed:
Paid Job? Yes ☐ No ☐ Internship?	Yes □ No □

OFF-CAMPUS Employment Job Title: _____ Employer: ____ Supervisor: _____ Dates Employed: _____ Job Title: _____ Employer: ____ Supervisor: Dates Employed: Class Schedule and Other Activities: On the schedule below, please mark all times when you CANNOT work. Use a "C" to designate times that you are in class, and an "O" to designate times when other activities preclude you from working at that time. Place the appropriate letter in the block that most accurately reflects the time of your commitment (Classes or Other activities). Monday Tuesday Wednesday Thursday Friday Saturday Sunday 8 a.m. 9 a.m. 10 a.m. 1 a.m. 12 p.m. 1 p.m. 2 p.m. 3 p.m. 4 p.m. 5 p.m. 6 p.m. 7 p.m. 8 p.m. 9 p.m. 10 p.m. Please *list the names* of the activities in which you participate that are represented by an "O" in the above chart: How many hours would you like to work? I certify that the information provided on this application for employment is complete, factually correct and honestly presented. I understand that this document is an application for employment, separate and apart from my permanent educational record and is for the use of the hiring department and the Student Employment Office only. In consideration for my employment, I agree to conform to all current and subsequent rules and regulations of the University of Richmond and the area for which I will be working. Signature _____ Date _____ For Departmental Use Only Interviewed? Yes □ No □ If no, reason: Hired? Yes □ No □ If no, reason: Job Approval Form Sent? ☐ Release to Work Rec'd for new employees? ☐ Pink copy of JAF recd from Student Employment? ☐ Date of Termination: _____ Reason: ____

Student Employment Notified?

(Note: Student Employment Office must be notified of any terminations which occur prior to