

Full-time Staff Employment Application

The University-Student Union at California State University, Los Angeles is an equal-opportunity/Title IX employer. In accordance with applicable law, we prohibit discrimination and harassment against employees, applicants for employment, individuals providing services in the workplace pursuant to a contract, unpaid interns, and volunteers based on their actual or perceived race, religious creed, color, national origin, ancestry, physical or mental disability, medical condition, genetic information, marital status, sex and gender, gender identity and gender expression, age, sexual orientation, military and veteran status, an individual's reproductive health decisions and any other consideration protected by federal, state or local law.

Please complete all the fields of the application.

General Information			
Position Applying for:	Personal E-mail:		
Name: Last, First, Middle Initial	Cell Phone:		
Address: Number, Street, Apt #	City, State, Zip Code:		
Can you provide evidence that you are legally authorized to work in the U.S.?		Yes	No
Have you ever been terminated from employment or asked to resign from employer?		Yes	No
If yes, please provide company name(s) and details:			
Are you able to perform the essential functions of the job for which you are applying with or without reasonable accommodation?			No
Upon request, reasonable accommodation will be provided to individuals wi employment process and perform essential job functions when this does no		è	
Are you or have you ever been an employed by the University-Student Union at Cal State LA?		Yes	No
Do you have any relatives or friends employed by the University-Student Union?		Yes	No
If yes, provide their name, relationship, and department:	How did you learn about the po	sition?	

Education					
Begin with most recent education level.					
College or University, Trade school	Major	Certificate or Degree	Date Received		
Additional Skills					
List any other education relevant to this position; cou	urses, licenses, seminars, publicat	ions, etc.			
		·			
Discovidentife and diff. In societies and differentiated	to the months of the control of the	Life the souther than a Common			
Please identify any skill, knowledge or ability related	to this position which would assis	t in the evaluation of your ap	plication.		
List all your computer and software experience.					
References					
ist three people not related to you who can att	est to your professional abilit	ies and expertise.			
Name:	Phone Number:	E-mail:			
Company Name and Title:	Address: City, State, Z				
	nadressi city, state, 2				
Name:	Phone Number:	E-mail:			
Company Name and Title:	Address: City, State, Z	in			
		·F			
Name:	Phone Number:	E-mail:			
Company Name and Title:	Address: City, State, Z				
company nume and mac.	, was cost city, state, 2	·r			

Employment

A cover letter, résumé, and portfolio may be attached and is considered as supplemental only, and not as a replacement for information requested on the application. Incomplete application information could disqualify you from further consideration.

Begin with your present job or most recent employment. Include paid or unpaid positions (internships, volunteer, and military service).

	Company Name:	Start Date and End Date:	Reason for leaving:
upervisor Name and Title:	Employer E-mail:	Company Address:	City, State, Zip Code:
uties and Responsibilities:			
		Civil Dalamad Ful Dalama	Reason for leaving:
Job Title:	Company Name:	Start Date and End Date:	Reason for reaving.
Supervisor Name and Title:	Employer E-mail:	Company Address:	City, State, Zip Code:
Outies and Responsibilities:			
Job Title:	Company Name:	Start Date and End Date:	Reason for leaving:
		Company Address:	City, State, Zip Code:
Supervisor Name and Title:	Employer E-mail:		
Supervisor Name and Title: Outies and Responsibilities:	Employer E-mail:		

terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of the University-Student Union has the authority to make any assurance to the contrary.

I attest with my signature below that I have given the University-Student Union true and complete information on this application. No requested information has been concealed. I authorize the University-Student Union to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or termination.

Signature	Date