



# Work Study Referral

SE Office Use Only:	
Date Received:	_____
FA Status:	GPA: _____
GPA	Units: _____
DEPT Referred:	_____
	_____

Student Name: \_\_\_\_\_ SID# \_\_\_\_\_ Date: \_\_\_\_\_  
Last First

Address \_\_\_\_\_

Home #: ( ) \_\_\_\_\_ Email Address: \_\_\_\_\_

Alternate #: ( ) \_\_\_\_\_ Available Start Date: \_\_\_\_\_

### Education

- High School Diploma       GED       H.S Proficiency Certificate

Major: \_\_\_\_\_ Career Goal: \_\_\_\_\_

### Additional Training

School/ Training	Courses	Hours Completed	Completed/ Certificate Awarded
			<input type="checkbox"/> Yes
			<input type="checkbox"/> Yes
			<input type="checkbox"/> Yes

### Skills

- Typing \_\_\_\_\_ WPM       Clerical
- Word       Other Programs \_\_\_\_\_
- Powerpoint      List 3 additional work skills \_\_\_\_\_
- Excel      List any Languages other than English you speak and write fluently: \_\_\_\_\_
- Access \_\_\_\_\_

### Employment History

Job interest(s) and Area of work \_\_\_\_\_

(Optional: Attach Resume or additional work history)

From _____ To _____	Job Duties: _____
Co. Name _____	_____
Job Title _____	_____
Highest Hrly wage _____	_____
<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time # of Hrs(Wk) _____	

From _____ To _____	Job Duties: _____
Co. Name _____	_____
Job Title _____	_____
Highest Hrly wage _____	_____
<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time # of Hrs(Wk) _____	

### Workforce Preparation Verification

- Work Study Eligible, WTW on file valid \_\_\_\_\_ to \_\_\_\_\_ SUM \_\_\_\_\_ FAL \_\_\_\_\_ WIN \_\_\_\_\_ SPR \_\_\_\_\_

Authorized By: Counselor/ Coordinator- Terrie Hawthorne \_\_\_\_\_ Date: \_\_\_\_\_

Scanned to STUDENT EMPLOYMENT ( [angela.boland@mvc.edu](mailto:angela.boland@mvc.edu) ) on: \_\_\_\_\_ BY: \_\_\_\_\_