



# FRESNO STATE POLICE DEPARTMENT

## TRAFFIC OPERATIONS

2311 E Barstow Ave, M/S PO14    (559) 278-2277  
 Fresno, CA 93740    (559) 278-7538 (fax)

### EMPLOYMENT APPLICATION STUDENT ASSISTANT

#### PERSONAL INFORMATION

LAST NAME		FIRST NAME		M.I.
STREET ADDRESS		CITY, STATE, ZIP		
PHONE NUMBER	EMAIL ADDRESS <span style="font-size: small; text-align: center;">@MAIL.FRESNOSTATE.EDU</span>		STUDENT I.D. #	
GRADUATION DATE	DO YOU HAVE A DUI OR ANY POINTS ON YOUR DRIVING RECORD? <input type="checkbox"/> YES <input type="checkbox"/> NO		DRIVER'S LICENSE #	STATE

IF YES, PLEASE EXPLAIN:

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CHECK ALL DETAILS YOU ARE INTERESTED IN WORKING

<input type="checkbox"/> ESCORT, SAFETY DETAIL	<input type="checkbox"/> PARKING FRONT COUNTER	<input type="checkbox"/> DISPATCH CALL-TAKER
<input type="checkbox"/> ESCORT, SCOUT DETAIL	<input type="checkbox"/> CAMERA OPERATOR	

HOW DID YOU HEAR ABOUT THIS JOB?

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#### PREVIOUS WORK HISTORY

##### EMPLOYER #1

EMPLOYER	DATE OF EMPLOYMENT
SUPERVISOR NAME AND TITLE	PHONE NUMBER

JOB TITLE AND DUTIES/RESPONSIBILITIES

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REASON FOR LEAVING

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**EMPLOYER #2**

EMPLOYER	DATE OF EMPLOYMENT
SUPERVISOR NAME AND TITLE	PHONE NUMBER
JOB TITLE AND DUTIES/RESPONSIBILITIES	
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REASON FOR LEAVING
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**EMPLOYER #3**

EMPLOYER	DATE OF EMPLOYMENT
SUPERVISOR NAME AND TITLE	PHONE NUMBER
JOB TITLE AND DUTIES/RESPONSIBILITIES	
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REASON FOR LEAVING
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**EMPLOYER #4**

EMPLOYER	DATE OF EMPLOYMENT
SUPERVISOR NAME AND TITLE	PHONE NUMBER
JOB TITLE AND DUTIES/RESPONSIBILITIES	
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REASON FOR LEAVING	
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**ADDITIONAL INFORMATION**

LIST ANY SPECIAL TRAINING OR SKILLS THAT MAY HELP YOU IN THIS POSITION
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LIST ALL JOBS, EXTRA-CURRICULAR ACTIVITIES, AND COMMITMENTS THAT MAY AFFECT YOUR SCHEDULE
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**IMPORTANT: ATTACH A COPY OF THE FOLLOWING WITH YOUR APPLICATION**

- UPCOMING SEMESTER CLASS SCHEDULE**
- RESUME**

## AVAILABILITY

-PLEASE MARK AND "X" IN EACH ONE HOUR BLOCK THAT YOU WOULD LIKE/BE AVAILABLE TO WORK

	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
0700							
0800							
0900							
1000							
1100							
1200							
1300							
1400							
1500							
1600							
1700							
1800							
1900							
2000							
2100							
2200							
2300							

I CERTIFY THAT THE FORGOING INFORMATION IS TRUE TO THE BEST OF MY KNOWLEDGE.

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_