Last Name:	First Name:	Middle Initial:
myWSU ID:		
Date of Birth:	(MM/DD/YY)	
Address:	City:	State: Zip:
Home phone: ()	Work phone: ()	
Check one: U.S. Citizen [ ]	Permanent Resident [ ]	International Student [ ]
Are you eligible for Work-study? Yes	s[] No[]	
Are you currently employed on camp	us? Yes[] No[] If ye	es, total number of hours:
WSU Department:	WSU Box #:	Phone #:
Educational Information  College classification:		
Currently enrolled at WSU? Yes [ ]	No[]	
<b>B</b>		



## UNDERGRAD/GRAD STUDENT ASSISTANT APPLICATION VETERANS UPWARD BOUND

Please shade the times that you are available to work.

	SUN	MON	TUES	WED	THURS	FRI	SAT
8:00 am							
9:00							
10:00							
11:00							
12:00 pm							
2:00							
3:00							
4:00							