Last Name:	First Name:				
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					



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							
1:00							
2:00							
3:00							
4:00							
5:00							
6:00							
7:00							
8:00							
9:00							
10:00							