

COCC Veterans Work Study: Application



Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email: _____ Email: _____
COCC Other

Position Applying for: _____

Have you ever applied for a position, or been employed, with us before? YES NO
 If yes, when? _____

Do you understand that this position requires a criminal history check? YES NO

COCC Information

COCC ID: _____ First term at COCC: _____

Degree/Certificate: _____ Program/major: _____

Are you currently using VA Education Benefits? YES NO
 Benefit Type: _____

Are you in good academic standing (2.0 GPA or higher) at COCC? YES NO
 COCC GPA: _____

Additional Training/Education

College/Trade: _____ Location: _____

From: _____ To: _____ Degree(s) earned: _____

College/Trade: _____ Location: _____

From: _____ To: _____ Did you earn a GED or high school diploma? YES NO

Military Service

Branch(es): _____ Position: _____

Enlisted Date: _____ Discharged Date: _____ Rank at Discharge: _____

If other than honorable, explain: _____

Are you currently serving?: YES NO
 Branch: _____

I am a dependent of a veteran and I receive DEA benefits. YES NO

Employment

Current Employer: _____ Phone: _____

Job Title: _____ Supervisor: _____

Responsibilities: _____

From: _____ Average hours per week: _____

May we contact your current supervisor for a reference? YES NO

Past Employer: _____ Phone: _____

Job Title: _____ Supervisor: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Past Employer: _____ Phone: _____

Job Title: _____ Supervisor: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Skills, Interests, and Qualifications

1. Share your interest in this specific position.

2. Computer Skills

Summarize your familiarity with various software products. (Rate 10 for very proficient down to 1 for unfamiliar)

MS Word: ____ MS Excel: ____ MS Powerpoint: ____ MS Access: ____ MS Outlook: ____

Other: (Specify) _____

4. Summarize special position-related skills and qualifications you have acquired from employment, additional training, or through other activities (including your special interests, languages, hobbies, and/or sports).

Personal References

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

City & State: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

City & State: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

City & State: _____

Disclaimer and Signature

I certify that the answers given herein are true and complete.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless an authorized executive of this organization specifically acknowledges such change in writing.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand also that I am required to abide by all rules and regulations of the employer.

Signature: _____ Date: _____

Please email this form to vetsed@cocc.edu

COCC Veterans Work Study Site Supervisors

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