



Hennepin Technical College™

STUDENT EMPLOYMENT APPLICATION

Submit this form and any attachments to the hiring supervisor.

Student Name: _____ Tech ID: _____
Last Name First Name MI

Student Email: _____ Phone: _____

Program Major: _____ Campus: BPC EPC Position Applying for: _____

By checking this box I am confirming that my address, phone, and email address are up-to-date in eServices.

Workstudy Eligibility

Have you completed a FAFSA? Yes No

To be considered, you must complete the Free Application for Federal Student Aid at www.fafsa.gov

Are you eligible for workstudy? *Check your eServices account for award amounts and attach a printout of your award amounts to this application.*

Fall Award Spring Award
\$ _____ \$ _____

- Yes Federal or State
- No Email fa@hennepintech.edu to inquire if you are eligible by repackaging your financial aid. *If no, you only qualify for positions that are funded by department funds. Check with the hiring supervisor if the position is non-workstudy eligible.*

Do you have court ordered child support which is required by law to be withheld from your wages?
Only required if claiming State Workstudy funds.

- Yes No

Terms and Conditions of Employment

Initials: _____

- You can work on average up to 15 hours per week.
- You must be punctual, efficient, and cooperative in performance of this position. Inform your supervisor in advance of any absence.
- Maintain an accurate eTimesheet and submit eTimesheet by designated deadlines. Late eTimesheets will result in a delayed direct deposit. Please follow your work schedule.
- Your job duties may be changed at the discretion of your supervisor.
- You are expected to carry your own insurance, as the college does not offer any.
- Employment must cease:
 - Once you have earned your specified dollar amount of the workstudy award
 - Once you are enrolled less than half-time (6 credits) I am currently enrolled in _____ credits.
 - If your award is rescinded by the Financial Aid office
 - If you are placed on suspension at any time
- You may be dismissed without cause by your supervisor or the financial aid office.

Confidentiality Agreement

Initials: _____

I am aware that the data and materials to which I may have access to while employed must be treated in a professional and confidential manner.

I agree herein, as a consideration of my employment, that I will not disclose or cause to be disclosed any information which I may have knowledge of at any time. Such information includes, but is not limited to, student records for which I have access.

I agree to review institutional policy and appropriate state and federal laws concerning the confidentiality of records, the improper release of information, and the alteration or destruction of a student record.

I am aware that any breach of confidentiality of this material or any abuse of my position, including, but not limited to, alteration of records, destruction of records or other similar acts, may constitute a basis for immediate termination of employment and student disciplinary action.

I accept the conditions indicated above and attest that all information that I have presented on this student employment application is true and complete.

Student Signature: _____ Date: _____