

CAMPUS PUBLIC SAFETY Student Employment Application

Name	(Last, First, Middle	V #	Date of Application
Mailin	g Address		Date Available for Work
City, S	State, Zip Code		Email
Phone	Number		FrSoph JrSr
Term .	Applying for: Fall Wi	inter Spring Summer	_
What	hours are you unable to w	ork and why?	
Refere	ences: Please list three pe	ersons not related to you	
	<u>Name</u>	<u>Address</u>	<u>Phone</u>
Please	e list past work experience	(you may attach a resume if you h	nave one available):
2.			
3.			
4.			

I understand that the Campus Public Safety Office weekends, holidays, nights, and all shifts when I'm		rogram. I'm willing to work I No
If no, explain:		
I understand that if I'm hired, the department will se schedule the department may not consider outside am willing to work within these employment conditi	e personal interests that conflict with c	
If no, explain:		
I understand that this is a job like any other employ I've received approval from my supervisor for time		between school breaks unless
If no, explain:		
Do you have a criminal history, felony or arrest recexplain:		• • •
Are you willing to work on short notice, call back or	be on call? ☐ Yes ☐ No	
Are you willing to work hours between 12 midnight	and 8 a.m. during the week, weekend	ds and holidays?
☐ Yes ☐ No If no, explain:		
	Student Applicant Signature	Date
Rev.061515		
CPS use only:		

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Student Staff Position

Section 1: Position Information

Class Number: 110

Working Title: Campus Public Safety Student Staff

Effective Date: June 9, 2015

Effective pay: Minimum Wage

Section 2: Position Information

- Campus Public Safety employs full-time WOU students, in good judicial and academic standing, with a minimum cumulative and term GPA of 2.00.
- Student employees are required to complete an application packet.
- Student employees will be hired based on skills, ability, values, ethics, compatibility, and willingness to fit into department scheduling.
- Student employees retain no rights to employment and may be terminated at the discretion of the department or supervisor.
- Student employees will be expected to perform their duties in a professional manner consistent with established policies and procedures. Students not performing up to established standards may be dismissed.
- Initiative, service and a professional attitude are expected at all times.
- Campus Public Safety will utilize student employees in parking enforcement and the communications desk.
- Student employees must be willing to work weekends, nights, holidays, breaks, including Christmas and Spring breaks. This may include split shifts and early morning shifts so the department can work around school schedules.
- Schedules may change frequently. They will be used in support functions during short notices, special events, weekends, and evenings. (Schedules will change and are not fixed.)
- Excessive time-off requests by a student and/or their inability to work on short notice to assist with coverage will be grounds for termination or not continuing a student into the next term employment cycle.

- Student employees will not work alone on a shift and will only provide assistance to the on duty officer as a back up. Student employees will not be used as first responders and are not to respond to first aid, medical or crime incidents without a full time officer.
- Student employees must complete a written training curriculum within a reasonable period of time and perform all functions in a reasonable manner. Students unable to complete the training curriculum will not be qualified to be an employee of Campus Public Safety department.
- There is a zero tolerance for insubordination towards department members, staff, or supervisors.
- Student employees are expected to be examples, obey all laws, university procedure, not frequent or participate in activities off duty that will compromise ethics or place the student employee in a conflict when carrying out duties. This includes frequenting parties where alcohol is served and students are under age and/or illegal drugs may be/are present.
- Staff employed by the Campus Public Safety Department are expected to be model citizens and engage in no activities on or off duty that will or may compromise the integrity of the Department.

Student Signature

Failure to do so will result in disciplinary action up to and including immediate termination.

WESTERN OREGON UNIVERSITY DRIVERS AUTHORIZATION PLEASE FILL OUT COMPLETELY AND CLEARLY

In connection with the campus Vehicle Use Policy approved by the President's staff, and to receive approval to drive a state motor pool vehicle, please provide the following information.

	o					
Che	eck One: FACULTY	STAFFSTUI	DENTVOLU	JNTEEROUTSI	IDE AGENCY	
1. Last NameM.I						
2. OSU or WOU ID NoOperator's Date of Birth						
3.	Driver's License No	Exp	oiration Date	State of Issue		
4.	Work phone #8-84	81	E-Mail	thibeaultk@wou.edu		-
5.	Authorizing Department or	Agency Campus P	ublic Safety			-
6.	Department/Agency Addre	ssWOU				
7.	Driver/Dept Information C	ontact Person Kevi	n	Phone#	8-8481	_
9. 10.	University or check out a 12	2-passenger van from Ore ourse Completed? Yes	gon State University. No** X **IF N	(if completed please provi-	de a copy with this form)	size van for Western Oregon or Western Oregon University
	CULTY AND STAFF ARE AU IVING RECORD ON AN AN		IMUM DRIVER REQ	UIREMENTS BELOW AR	E MET. WESTERN ORE	GON UNIVERSITY WILL CHECK
AD	DITIONAL INFORMATION	NEEDED FOR STUDEN	TS AND VOLUNTEE	RS:		
	Date Authorized from					
11. l	Project Leader/Supervisor/A	dvisor		Phone #		
Any Sta	y person operating a state veh ndards in OAR 125-155-0100	nicle MUST meet <i>Minimu</i> 0-0200 as summarized be	m Driver Requiremer low:	nts and Voluntary and Co	mpulsory Driver	
star I an	duties of a driver, driv suspension of driving 4. Have NO more than the 5. Have NO careless driv	ing while suspended, eluci privileges within the last a nree moving traffic violati ing convictions within the ing traffic infractions with the above driver require by authorization period, I and Procedures governing	ling a police officer, for 24 months. Ons within the last 12 elast 12 months. In the last 12 months. In the last 12 months will notify my authorithe use of State vehicle.	and should I fail to meet t zing department and/or s	rer license revocation or hese requirements and upervisor immediately.	
Driv	ver's Signature:			Today's Date:		
ΙH	EREBY AUTHORIZE THE A	BOVE PERSON to operat	e a State-owned vehic	ele in accordance with Ore	gon State Law and	-
Sigi	nature of Dean/Director/Dep	ot Chair or Designee:		D	Pate:	-
Тур	ed or printed name of signer	:				-
Plea	ase return Driver Authorizati	345 N. Monr Monmouth,	nouth Avenue			
			FOR OFFICE	USE ONLY		
	Date Processed:	Pro	ocessed by:			
	Approved:		Denied			
	Evniration Date:		Points:			

Defensive Driving Course Completed (if required)

_(Date)

WAIVER OF CONFIDENTIALITY FOR BACKGROUND CHECK

AUTHORIZATION TO OBTAIN INFORMATION

I,, am an applicant for the Employee for the State of Oregon through Western Oregon interview process, I hereby provide authorization and with University Office of Public Safety to contact previous files and information of a confidential and privileged is as it relates to my work history and background. This record check and major traffic crime record check under record check.	on University. As part of vaiver of confidentiality employers, references, nature to determine suits waiver includes authorize	the application and to the Western Oregon , and review personnel tability and qualifications zation to seek a criminal
, date of birth	, and WOU V#	
I hereby release the State of Oregon and Western Orego result from obtaining the information requested for the pu This release expires one year after date signed.		and damage which may
Application Authorization (grinted and give advance)	Dete	
Application Authorization (printed and signed name)	Date	
Date		Witness