

Human Resource Services

5735 47th Avenue • Sacramento, California • 95824

INSTRUCTIONS: Please answer all questions completely and accurately. Use ink or typewriter. (PLEASE PRINT)

High School Student Application

NOTE: Student's name on application must match the name listed on their Social Security Card.

Attach a copy of Social Security Card to this application.

Position Applying For: (Use Exact Title)				Birth Date:
Last Name:	First Name:		Middle:	
Address:				
City:		State:	Zip:	
Home Phone:	Other Phone:		Social Security #	
Education: Circle Highest Grad	e Completed 6 7	8 9 10	11 12 GED:	☐ Yes ☐ No
High School Name:				Graduated:
Location:				☐ Yes ☐ No
The Sacramento City Unified School District is committed in all of its activities, policies, programs, and procedures to provide equal opportunity for all to avoid discrimination against any person regardless of race, color, national origin, ancestry, religious creed, age, marital status, pregnancy, physical or mental disability, medical condition, veteran status, gender, or sexual orientation.				
→ Signature: (in Full)	gender, or sexual offe	inution.	Date:	

Completed application packet to include the following:

- PSL-F183 High School Student Application
- PSL-F053 Home Address / Emergency Data
- PSL-F054 Ethnic Origin Questionnaire
- Employment Eligibility Verification (Form I-9)
- Copy of Social Security Card
- Identification Card / Student ID
- Current W-4 Employee's Withholding Allowance Certificate
- Current EDD Employee's Withholding Allowance Certificate
- Work Permit