

PANGASINAN STATE UNIVERSITY
OFFICE OF STUDENTS AND ALUMNI AFFAIRS (OSAA)
STUDENT ASSISTANT APPLICATION FORM

Attach passport
size photo here

This form is intended to collect information for the screening, evaluation, and placement of students applying for the Student Assistant Program. Please provide complete and accurate information.

APPLICANT INFORMATION

- Full Name (Last Name, First Name, Middle Name): _____
- Student Number: _____ Year and Course: _____ Email Address: _____
- Birthdate: _____ Age: _____ Sex: _____ Mobile Number: _____
- Complete Address: _____
- Boarding House Address, if applicable: _____
- Do you belong to any of the following equity groups: ☐ Person-with-disability ☐ Indigenous People ☐ First Generation Student
(Please check which applies) ☐ Solo Parent / Child of a Solo Parent ☐ Family is 4Ps beneficiary

ACADEMIC INFORMATION

- Most Recent GWA: _____
 - Do you have failed, incomplete, or dropped subjects in the previous semester? ☐ None ☐ Yes
 - Are you currently a recipient of a scholarship or financial assistance? ☐ Yes ☐ No.
- If yes, Specify: _____

STUDENT ASSISTANT ELIGIBILITY

- Are you employed or currently have other commitments that may affect your availability? ☐ No ☐ Yes
- If yes, please specify the commitment and schedule: _____
- Have you previously served as a Student Assistant at PSU? ☐ No ☐ Yes

If yes, indicate office/unit and semester/SY: _____

FINANCIAL / ASSISTANCE INFORMATION

- Father's Name: _____ Mother's Name _____
- Occupation: _____ Occupation: _____
- Number of Family Members/Dependents: _____ Number of Siblings Currently Attending School: _____
- Are you financially dependent on your parent/s or guardian? ☐ Yes ☐ No _____
- Do you have other sources of financial support? ☐ No ☐ Yes. If yes, specify _____
- Briefly explain your reason for applying for the Student Assistant Program: _____

SKILLS AND COMPETENCIES

- Check all applicable skills:
- ☐ Microsoft Word ☐ Microsoft Excel ☐ Microsoft PowerPoint ☐ Google Docs ☐ Google Sheets ☐ Google Forms
 - ☐ Canva/Graphic Design ☐ Data Entry ☐ Filing/Records Management ☐ Customer Service ☐ Communication
 - ☐ Public Speaking ☐ Social Media Management ☐ Photography ☐ Videography ☐ Basic Troubleshooting
 - ☐ Research ☐ Writing/Editing. ☐ Event Assistance ☐ Sports/Physical Activities

Please specify other relevant skills or competencies: _____

AVAILABILITY / PREFERRED WORK SCHEDULE

Indicate your available periods when you are free to render service.

Day	AM	PM
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

I certify that the information provided in this application is true, complete, and accurate to the best of my knowledge. I understand that submission of this application does not guarantee selection as a Student Assistant. I authorize the University to verify the information provided for purposes of screening, evaluation, selection, and placement under the Student Assistant Program. I understand that providing false or misleading information may result in disqualification or termination of my Student Assistant assignment, subject to applicable University policies.

☐ I have read, understood, and agree to the declaration and consent above.

Applicant's Signature over Printed Name: _____ Date: _____

