



UNIVERSITY OF CENTRAL FLORIDA
Lockheed Martin College Work Experience Program

APPLICATION



HANDWRITTEN APPLICATIONS WILL NOT BE ACCEPTED

OFFICE USE ONLY
Status: _____ Current Hours: _____
UCF GPA: _____ Overall GPA _____
Initials: _____ Date: _____
Nepotism: _____ Veteran: _____

NAME: _____
PID: _____
E-MAIL: _____
ADDRESS: _____
CITY: _____ ZIP: _____
PHONE: () _____
MAJOR(S): _____
MINOR(S): _____
GRADUATION DATE: _____

Do you currently work on campus? Yes ___ No ___

SECURITY INFORMATION:

- To obtain security clearance, you MUST be a US citizen.
Do you currently have the ability to obtain a Department of Defense security clearance? Yes ___ No ___
If you have ever been granted a security clearance by any Government agency, indicate level of clearance, when granted and by whom: _____
Have you ever had a security clearance suspended, denied or revoked? Yes ___ No ___
Do you have any criminal charges pending? Yes ___ No ___
Have you ever been convicted of a felony? Yes ___ No ___ If yes, list all convictions, giving a brief description including date, place and charge _____
Do you hold an active or expired passport from any country other than the United States? Yes ___ No ___ If yes, please list all passports (active or expired) _____

Have you previously held any position with Lockheed Martin, either as an intern, co-op or CWEP Participant? Yes ___ No ___

If yes, please explain: _____

Do you have any relatives employed by Lockheed Martin? Yes ___ No ___

If YES: Name: _____ Dept. Name & Number: _____ Location: _____

Please describe the relationship: _____

Are you a veteran or have former military service? Yes ___ No ___

If YES, do you want us to disclose this information to Lockheed Martin? Yes ___ No ___

The employer is subject to certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations. In order to comply with these laws, the employer invites employees to voluntarily self-identify their race or ethnicity. Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to be summarized and reported to the federal government for civil rights enforcement. When reported, data will not identify any specific individual.

Are you Hispanic or Latino? Yes ___ No ___

What is your race? Select one or more.

American Indian or Alaska Native ___ Asian ___ Black or African American ___

Native Hawaiian or Pacific Islander ___ White ___

To participate in the UCF/Lockheed Martin College Work Experience Program, applicants must be eligible for a security clearance when necessary and must be a US citizen. Undergraduate students must be enrolled in 12 credit hours, while graduate students must be enrolled in 9 credit hours (6 credit hours if in the Lockstep MBA Program), during the Fall and Spring Semesters. Courses taken at other institutions must be in addition to the required UCF hours. Students must have and maintain a 3.0 UCF/Overall GPA.

FAILURE TO MAINTAIN THE REQUIRED GPA OR COURSE LOAD CAN RESULT IN IMMEDIATE TERMINATION FROM THE PROGRAM.
OMISSION OR FALSIFICATION OF ANY INFORMATION ON THIS APPLICATION WILL BE GROUNDS FOR IMMEDIATE TERMINATION. I HEREBY GRANT THE COLLEGE WORK EXPERIENCE PROGRAM OFFICE PERMISSION TO MAKE MY TRANSCRIPT AND PERSONAL INFORMATION AVAILABLE TO THE COLLEGE WORK EXPERIENCE PROGRAM EMPLOYER AND AGREE TO ABIDE BY THE RULES GOVERNING THE COLLEGE WORK EXPERIENCE PROGRAM.

STUDENT SIGNATURE: _____

DATE: _____

Electronic signature accepted

