

*Please complete this application by typing or printing in ink. INCOMPLETE or UNSIGNED applications will not be considered. We are an equal opportunity employer. We do not discriminate on the basis of race, religion, color, sex, age, national origin, marital status, or disability.*

**APPLICATION FOR EMPLOYMENT**

|  |  |  |  |
| --- | --- | --- | --- |
| **PERSONAL INFORMATION** | | | |
| Name (Last) | (First) | (Middle) | Home Phone |
| Address (Street) | (City/State) | (Zip) | Other Phone |
| Alternate Address (Street) | (City/State) | (Zip) | Email address |

|  |  |
| --- | --- |
| **POSITION** | |
| Position applied for: | Available Starting Date: |
| Desired Pay Range: | Are you currently employed? |
| How did you learn about our institution? | Date of application: |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **EDUCATION AND TRAINING** | | | |  |
|  | Name and location | Graduate-Degree | Major/Subject of Study | Year Awarded |
| High School |  |  |  |  |
| College or University |  |  |  |  |
| Specialized Training |  |  |  |  |
| Other Education |  |  |  |  |

Please list any additional skills that may contribute to your abilities in performing the position you are applying for.

|  |  |  |  |
| --- | --- | --- | --- |
| **WORK EXPERIENCE (Please list beginning from most recent)** | | | |
| From: | Company Name | Location/Address | Role/Title |
| To: |
| List your responsibilities: | | Reason for Leaving: | |
| From: | Company Name | Location/Address | Role/Title |
| To: |
| List your responsibilities: | | Reason for Leaving: | |
| From: | Company Name | Location/Address | Role/Title |
| To: |
| List your responsibilities: | | Reason for Leaving: | |
| From: | Company Name | Location/Address | Role/Title |
| To: |
| List your responsibilities: | | Reason for Leaving: | |

HAVE YOU EVER BEEN CONVICTED FOR A FELLONY?  No  Yes  
If yes, please explain:

The information that you provide on this application is subject to verification. Falsifications or misrepresentations may disqualify you from consideration for employment or, if hired, may be grounds for termination at a later date. Do you want to be informed before we contact your previous/present employer?  Yes  No

With my signature below (typed or written), I certify that all information on this and all attached pages is true, correct and complete to the best of my knowledge and contains no willful falsifications or misrepresentations.  I authorize all former employers to release job-related information they may have about me and I release all persons or companies from any liability or responsibility for providing such information.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_