



**WORK EXPERIENCE: BEGIN WITH YOUR MOST RECENT OR PRESENT EMPLOYER PLEASE FILL OUT COMPLETELY - MAKE A CHECK MARK BY ANY EMPLOYER/SUPERVISOR YOU DO NOT WANT CONTACTED AT THIS TIME.**

EMPLOYER	POSITION	SUPERVISOR	DUTIES
_____	_____	_____	_____
ADDRESS _____	CITY _____	STATE/ZIP CODE _____	
DATES EMPLOYED	HOURLY RATES	PHONE NUMBER	REASON FOR LEAVING
FROM: _____	START: _____	_____	_____
TO: _____	FINISH: _____	_____	_____

EMPLOYER	POSITION	SUPERVISOR	DUTIES
_____	_____	_____	_____
ADDRESS _____	CITY _____	STATE/ZIP CODE _____	
DATES EMPLOYED	HOURLY RATES	PHONE NUMBER	REASON FOR LEAVING
FROM: _____	START: _____	_____	_____
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ADDRESS _____	CITY _____	STATE/ZIP CODE _____	
DATES EMPLOYED	HOURLY RATES	PHONE NUMBER	REASON FOR LEAVING
FROM: _____	START: _____	_____	_____
TO: _____	FINISH: _____	_____	_____

**EDUCATION: CIRCLE HIGHEST GRADE COMPLETED: ELEMENTARY 1 2 3 4 5 6 7 8 HIGH 9 10 11 12 COLLEGE 1 2 3 4 4+**

NAME OF SCHOOL	CITY/STATE	COURSES STUDIED	GRADUATED (CIRCLE ONE)
ELEMENTARY			YES NO
HIGH			YES NO
COLLEGE			YES NO

**EMERGENCY CONTACT: PERSON TO NOTIFY IN CASE OF AN EMERGENCY**

NAME: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_ WORK NUMBER \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_  
 RELATIONSHIP \_\_\_\_\_

**UNIVERSITY MANAGEMENT IS AN EQUAL OPPORTUNITY EMPLOYER. FEDERAL AND/OR STATE LAW PROHIBITS DISCRIMINATION IN EMPLOYMENT BECAUSE OF RACE, COLOR, CREED, SEX, AGE, DISABILITY, NATIONAL ORIGIN, CITIZENSHIP, VETERAN OR MARITAL STATUS.**

I CERTIFY THAT ALL THE INFORMATION FURNISHED ON THIS APPLICATION IS TRUE, COMPLETE AND CORRECT. I UNDERSTAND AND AGREE THAT ANY FALSIFICATION, MISREPRESENTATION, MISLEADING STATEMENT OR OMISSION OF FACT ON EITHER THIS APPLICATION OR DURING THE PRE-HIRE PROCESS WILL BE SUFFICIENT FOR (1) MY NOT BEING OFFERED EMPLOYMENT, OR (2) DISMISSAL AT ANY TIME IF I AM EMPLOYED.

I AUTHORIZE MY FORMER EMPLOYERS TO PROVIDE **UNIVERSITY MANAGEMENT** WITH ANY INFORMATION REGARDING MY EMPLOYMENT AND I RELEASE ALL PARTIES FROM ANY LIABILITY FOR ANY DAMAGES, WHICH MAY RESULT FROM FURNISHING SUCH INFORMATION.

I HAVE READ AND UNDERSTAND THE ABOVE, AND BY MY SIGNATURE BELOW, I ACCEPT THE ABOVE TERMS AND CONDITIONS FOR EMPLOYMENT IF I AM OFFERED A POSITION.

PRINT NAME \_\_\_\_\_ SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

<b>FOR OFFICE USE ONLY</b>	
REFERENCE CHECK: _____	<b>FIRST INTERVIEW RESULTS</b>
<b>SECOND INTERVIEW RESULTS</b>	