



STAFF APPLICATION FOR EMPLOYMENT

Samford University is an Equal Opportunity Institution that complies with applicable law prohibiting discrimination in its educational and employment policies and does not unlawfully discriminate on the basis of race, color, sex, age, disability, veteran status, genetic information, or national or ethnic origin.

PLEASE ANSWER EVERY QUESTION. PRINT CLEARLY IN INK.

Read and complete all requested information on pages 1-4 (Do not refer to resume).

NAME: _____
(LAST) (FIRST) (MIDDLE)

LIST ALL PREVIOUS NAMES: _____

ADDRESS: _____
(NUMBER) (APT#) (STREET) (CITY) (STATE) (ZIP)

TELEPHONE: (_____) _____ (_____) _____ (_____) _____
(HOME) (BUSINESS) (CELL PHONE)

E-MAIL ADDRESS: _____

IN CASE OF EMERGENCY CONTACT: _____ TELEPHONE: _____

PREVIOUS ADDRESSES IF ADDRESS HAS CHANGED DURING THE LAST SEVEN YEARS: (Add additional sheets if necessary)

NUMBER STREET CITY STATE ZIP FROM (DATE) TO

NUMBER STREET CITY STATE ZIP FROM (DATE) TO

GENERAL INFORMATION

POSITION PREFERRED: (ONLY ONE) _____ SALARY REQUIREMENTS: _____

ARE YOU ELIGIBLE TO WORK IN THE UNITED STATES OF AMERICA? YES NO

ARE YOU AT LEAST 18 YEARS OF AGE? YES NO

WHAT IS YOUR RELIGIOUS AFFILIATION? _____ CHURCH NAME: _____

DATE AVAILABLE FOR WORK: _____ REQUIRED DAYS/WEEKS NOTICE: _____

HOURS PREFERRED: FULL-TIME PART-TIME HOW MANY: _____ HOURS AVAILABLE: DAYS ONLY ANY SHIFT

HOW WERE YOU REFERRED TO Samford University? _____

HAVE YOU PREVIOUSLY COMPLETED AN APPLICATION FOR EMPLOYMENT WITH Samford University? YES NO

IF YES, WHEN? _____ FOR WHAT POSITION? _____

HAVE YOU EVER BEEN EMPLOYED BY Samford University? YES NO

IF YES, IN WHAT DEPARTMENT? _____ IN WHAT POSITION? _____

ARE YOU RELATED TO ANY EMPLOYEE OF Samford University? YES NO

IF YES, WHOM? _____ IN WHAT DEPARTMENT? _____
(NAME) (RELATIONSHIP)

EDUCATION

SCHOOL NAME	CITY	STATE	MAJOR COURSE OR SUBJECT	GRADE AVG	DATES ATTENDED FROM TO	DEGREE RECEIVED
HIGH SCHOOL <small>Did you graduate? _____ Receive a GED? _____</small>						
COLLEGE <small>Did you graduate? _____</small>						
COLLEGE <small>Did you graduate? _____</small>						
GRADUATE SCHOOL <small>Did you graduate? _____</small>						
MILITARY TRAINING						
BUSINESS/TECHNICAL						

LIST SCHOLASTIC HONORS, OFFICES HELD AND ACTIVITIES IN HIGH SCHOOL, COLLEGE AND GRADUATE SCHOOL:

ARE YOU PLANNING TO PURSUE FURTHER STUDIES? YES NO IF YES, WHEN, WHERE AND WHAT COURSES?

PLEASE LIST ANY CERTIFICATES, LICENSES OR PERMITS YOU HAVE, OR PROFESSIONAL ASSOCIATIONS OF WHICH YOU ARE A MEMBER OR PROFESSIONAL CERTIFICATIONS OR DESIGNATIONS WHICH YOU HOLD:

COMPUTER SKILLS: _____
(EXPERIENCE WITH PC HARDWARE, SOFTWARE PACKAGES, ETC.)

OTHER SKILLS: _____
(EXAMPLES ARE DICTAPHONE, ACCOUNTING, CRT, OTHER LANGUAGES SPOKEN)

HOW DID YOU OBTAIN THESE SKILLS? FORMAL EDUCATION WORK EXPERIENCE
 PROFESSIONAL SEMINAR

PLEASE DISCUSS ANY OTHER SKILLS AND ABILITIES OR EXPERIENCE YOU MAY HAVE WHICH THE OTHER SECTIONS OF THIS APPLICATION DO NOT GIVE YOU AN OPPORTUNITY TO LIST, THAT YOU FEEL WOULD BE USEFUL IN A POSITION WITH Samford University:

EMPLOYMENT RECORD

STARTING WITH PRESENT OR MOST RECENT, LIST PREVIOUS EMPLOYERS. INCLUDE SELF-EMPLOYMENT, SUMMER AND PART-TIME JOBS.

EMPLOYER INFORMATION	POSITION INFORMATION	REFERENCE INFORMATION
EMPLOYER NAME:	TITLE:	SUPERVISOR'S NAME:
	FROM: TO:	
NUMBER AND STREET:	DUTIES:	SUPERVISOR'S TELEPHONE:
CITY/STATE /ZIP:		MAY WE CONTACT AT THIS TIME AS A REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO ARE THEY AWARE THAT YOU ARE LOOKING FOR EMPLOYMENT ELSEWHERE? <input type="checkbox"/> YES <input type="checkbox"/> NO
REASON FOR LEAVING:		
	STARTING SALARY:	ENDING SALARY:

EMPLOYER INFORMATION	POSITION INFORMATION	REFERENCE INFORMATION
EMPLOYER NAME:	TITLE:	SUPERVISOR'S NAME:
	FROM: TO:	
NUMBER AND STREET:	DUTIES:	SUPERVISOR'S TELEPHONE:
CITY/STATE/ ZIP:		
REASON FOR LEAVING:		
	STARTING SALARY:	ENDING SALARY:

EMPLOYER INFORMATION	POSITION INFORMATION:	REFERENCE INFORMATION
EMPLOYER NAME:	TITLE:	SUPERVISOR'S NAME:
	FROM: To:	
NUMBER AND STREET:	DUTIES:	SUPERVISOR'S TELEPHONE:
CITY/STATE /ZIP:		
REASON FOR LEAVING:		
	STARTING SALARY:	ENDING SALARY:

EMPLOYER INFORMATION	POSITION INFORMATION	REFERENCE INFORMATION
EMPLOYER NAME:	TITLE:	SUPERVISOR'S NAME:
	FROM: TO:	
NUMBER AND STREET:	DUTIES:	SUPERVISOR'S TELEPHONE:
CITY/STATE/ ZIP:		
REASON FOR LEAVING:		
	STARTING SALARY:	ENDING SALARY:

If you need additional space for your Employment Record, please use an additional page as an addendum.

UNEMPLOYMENT RECORD

ACCOUNT FOR ALL PERIODS OF UNEMPLOYMENT OF ANY SIGNIFICANT DURATION OR MORE SINCE YOU LEFT SCHOOL UNTIL THE PRESENT TIME.

(MONTH/YEAR) _____ FROM _____ TO _____ STATE WHAT YOU WERE DOING _____

(MONTH/YEAR) _____ FROM _____ TO _____ STATE WHAT YOU WERE DOING _____

PLEASE READ BEFORE SIGNING.

IF YOU HAVE ANY QUESTIONS REGARDING THIS STATEMENT, PLEASE ASK BEFORE SIGNING.

I understand that the submission of this Samford University employment application does not mean that I will be offered employment and in no way obligates Samford University. In the event of my employment, I agree to and will comply with all the rules and policies of Samford University. I understand that such rules and policies are not contractual and may be amended or modified by Samford University as it deems necessary. I understand that employment, if offered, is subject to my satisfying employment eligibility requirements of the federal and state immigration laws.

I understand that either Samford University or I may terminate my employment at any time with or without notice, with or without cause, and that Samford University does not guarantee that any position will be continued for any length of time or that any job assignment or shift will be permanent. I also understand that no one other than the President or his designee has the authority to enter into any agreement for employment for any specified period and such agreement must be in writing and signed by one of these officers.

I understand Samford University will attempt to verify statements made on my application and made during my employment interview. When contacted by Samford University, I give my permission for my former employers to answer any and all questions based upon information available to them in my prior employment records. I understand that it is possible that my prior employment records may not be accurate. Nonetheless, in consideration of review of this application, I release Samford University and all my former employers from any liability as a result of the furnishing and receiving of this reference information. I understand that my failure to sign this reference release so Samford University can contact references and make a full background check of my previous work history may be deemed a withdrawal of my application.

I understand that I may be required to complete a separate Fair Credit Reporting Act Disclosure and Authorization form in order to continue with the application process or as a condition of employment. I further understand that in accordance with the Alabama Child Protection Act of 1999 a criminal records check is mandatory for persons applying for positions that will have unsupervised access to children under the age of 19.

I certify that all statements that I make on this application and all information submitted in connection with my application for employment is true and complete to the best of my knowledge and that I have withheld nothing that would, if disclosed, affect this application unfavorably. I understand that giving any false, incomplete or misleading statement or misrepresentation on this application or any information submitted in connection with my application may be considered cause for dismissal whenever discovered.

In connection with Samford University performing an investigation of the above mentioned information, I understand and hereby authorize Samford University to conduct searches on electronic social networking sites, including but not limited to Twitter.com, MySpace.com, Facebook.com, LinkedIn.com, Classmates.com, blogs, wikis, user-generated video and audio, and virtual worlds. I also understand that I am giving Samford University my consent and authorization to conduct searches of the aforementioned media in spite of any and all privacy protections that may be contained in the terms and conditions of those websites and any efforts I have made to restrict the information from viewing by the general public or others without specific rights to access the information. I also hereby release Samford University from any liability in connection with its use of information it finds on electronic social networking sites and the other related electronic media referenced above. I understand that I do not have any right to privacy or any expectation of privacy in any information that may be posted on a blog, on the web, on a social networking site or in any place that Samford University may obtain access as a result of this release.

HAVE YOU EVER PLED GUILTY OR NO CONTEST TO, OR BEEN CONVICTED OF, PAID A FINE FOR, BEEN DIRECTED TO A PRETRIAL DIVERSION PROGRAM, OR, IN ANY WAY ADMITTED GUILT FOR A CRIMINAL OR DISHONEST ACT, OTHER THAN A MINOR TRAFFIC VIOLATION? YES NO IF YES, PLEASE EXPLAIN:

I hereby acknowledge that I have read and understand these statements and that the information provided on this application is true and accurate.

SIGNATURE: _____

DATE: _____