



Clark State Community College Application for Employment



Clark State Community College is committed to assuring equal opportunity to all persons and does not discriminate on the basis of race, color, sex, gender, ethnicity, religion, national origin, sexual orientation, ancestry, age, marital status, veteran status, socio-economic status, or physical or mental disability and any other protected group status as defined by law or College policy in its educational programs, activities, admissions, or employment practices as required by Title IX of the Educational Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act and other applicable statutes. **Minorities are encouraged to apply.**

INSTRUCTIONS

Applicants must furnish complete and accurate information. Even when submitting a resume, this Application must also be fully completed. In responding to questions on this Application, you may attach an additional sheet(s) of paper should the space provided not allow adequate space for your information. If you cannot respond to an item, please include an explanation for not responding.

Incomplete applications will not be considered for employment.

GENERAL INFORMATION

INTERNAL APPLICANT

EXTERNAL APPLICANT

Name: _____ Application Date: _____
Last First Middle

Address: _____
Street City State Zip

Phone: Home (____) _____ Work (____) _____ Cell (____) _____

E-mail Address: _____

For which position(s) are you applying? _____

Are you over 18 years of age? Yes No If "No," state age: _____

(If "No," your employment is subject to verification that you are of legal age to work.)

Are you legally eligible to work in the United States? Yes No

How did you learn about this opening?

- | | | |
|---|--|--|
| <input type="checkbox"/> Newspaper (please specify): | <input type="checkbox"/> Springfield/Dayton Daily | <input type="checkbox"/> Columbus Dispatch |
| <input type="checkbox"/> Online (please specify site): | <input type="checkbox"/> Career Builder | <input type="checkbox"/> Chronicle |
| | <input type="checkbox"/> Dice | <input type="checkbox"/> Diverse |
| | <input type="checkbox"/> Indeed | <input type="checkbox"/> Monster |
| | <input type="checkbox"/> Springfield C o C | <input type="checkbox"/> Journal of Blacks in Higher Education |
| | <input type="checkbox"/> Journal of Blacks in Higher Education | <input type="checkbox"/> Central State Univ. Career Services |
| <input type="checkbox"/> Friend | | <input type="checkbox"/> Clark State website |
| | | <input type="checkbox"/> Higher Ed Jobs |
| | | <input type="checkbox"/> ODJFS |
| | | <input type="checkbox"/> Women in Higher Ed |
| | | <input type="checkbox"/> Wright State Univ. Career Services |

Other (please specify): _____

Are you available for: Full-time Part-time Date available to start: _____

Have you ever, or do you currently work for Clark State? Yes No If "Yes," when? _____

Which dept.? _____ Position title? _____ Supervisor? _____

Do you have any relatives currently employed with Clark State? Yes No

If Yes, who? _____ Relationship? _____

MILITARY SERVICE INFORMATION

Are/were you in the U.S. Armed Forces? Yes No Branch: _____

Length of service: From: _____ to: _____ Rank at discharge: _____

Describe any special job related training received relating to position applied for:

EDUCATION

High School: _____ Address: _____

City: _____ State: _____ Zip: _____

Did you graduate? Yes No If no, have you received your GED? Yes No

College/University: _____ Address: _____

City: _____ State: _____ Zip: _____

Major: _____ Dates attended: _____

Did you graduate? Yes No Degree received: _____

Graduate, Trade, Business, or Correspondence School: _____

Address: _____ City: _____ State: _____ Zip: _____

Major: _____ Dates attended: _____

Did you graduate? Yes No Degree/certification received: _____

Are you currently enrolled in school? Yes No Indicate years of experience with computers: _____

List software that you have working knowledge of:

EMPLOYMENT HISTORY

Starting with your present or last job, account for all periods of time, unemployment and military service included. **(All applicants must account for the last ten years.)** Even if you mark "no" and indicate you prefer we not contact your current employer at this time, your current or most recent employer may be contacted after a job offer has been made and accepted.

1.) Current or Most Recent Employer: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: (_____) _____ Supervisor's name: _____

Position held: _____ Full-Time Part-Time

Job duties and responsibilities:

Employed from: _____ to: _____ Start pay: _____ hr./yr. Final pay: _____ hr./yr.

Reason for leaving: _____

May we contact this employer? Yes No If "No," please explain:

2.) Employer: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: (_____) _____ Supervisor's name: _____

Position held: _____ Full-Time Part-Time

Job duties and responsibilities:

Employed from: _____ to: _____ Start pay: _____ hr./yr. Final pay: _____ hr./yr.

Reason for leaving: _____

May we contact this employer? Yes No If "No," please explain:

3.) Employer: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: (_____) _____ Supervisor's name: _____

Position held: _____ Full-Time Part-Time

Job duties and responsibilities:

Employed from: _____ to: _____ Start pay: _____ ^{○ ○}hr/yr Final pay: _____ ^{○ ○}hr/yr

Reason for leaving: _____

May we contact this employer? Yes No If "No," please explain:

Have you ever been discharged? Yes No If "Yes," please explain:

Summarize your skills and experience that qualify you for the position(s) you are seeking:

REFERENCES

Please list three professional references (No relatives please)

1.) Name: _____ **Association:** _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: Home (_____) _____ Work (_____) _____ Years acquainted: _____

2.) Name: _____ **Association:** _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: Home (_____) _____ Work (_____) _____ Years acquainted: _____

3.) Name: _____ **Association:** _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: Home (_____) _____ Work (_____) _____ Years acquainted: _____

CONDITIONS OF EMPLOYMENT AT CLARK STATE COMMUNITY COLLEGE

I, _____, hereby affirm that the information provided in this Application (and accompanying resume, if any) is true and complete to the best of my knowledge. I also understand that falsified information, significant omissions, or misrepresentations may disqualify me and may be considered sufficient justification for dismissal if discovered at a later date. When I responded to questions on this Application, I continued on a separate sheet of paper and attached it to this Application when I required more space to fully answer all questions.

I authorize a thorough employment background investigation and agree to cooperate in such investigations. I agree to release, from all liabilities or responsibilities, all persons, agencies, and corporations requesting or supplying such information. If employed, I release Clark State Community College from any liability for future references it may provide regarding my work history at the firm.

I understand that if employed, I will receive a letter of employment containing conditions of employment and will pledge to preserve in strictest confidence any sensitive information concerning Clark State Community College and/or their stakeholders, which comes to my knowledge through my position. I understand that nothing contained in this employment application or in the granting of any interview is intended to create an employment contract between Clark State Community College and myself for either employment or for the providing of any benefit. No promises regarding employment have been made to me and I understand that no such promise is binding upon Clark State Community College unless made in writing by the President or the Director of Human Resources of Clark State Community College. If an employment relationship is established, I understand that the relationship will be "*Employment at will*" and I have the right to terminate my employment at any time with or without notice, and Clark State Community College retains a similar right.

I agree that any inventions, publications, and/or patents, etc., that I produce, develop, or create while working as a Clark State Community College employee and using Clark State Community College resources become the sole property of Clark State Community College.

Signature

Date

By checking this box, I agree that my electronic signature is the legally binding equivalent to my handwritten signature.

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