

PERSONAL DATA

Date: _____

Name	Last	First	Middle		
Present Address	Number & Street	City	State	Zip	How long?
Previous Addresses (If less than 7 yrs. at present address)	Number & Street	City	State	Zip	How long?
	Number & Street	City	State	Zip	How long?
	Number & Street	City	State	Zip	How long?

Contact Phone Number (____) _____
Area Code Number

Are you 18 years old or over? Yes No

Alternate Phone Number (____) _____
Area Code Number

Are you willing to work overtime? Yes No

Email Address _____

Position you are applying for: _____
Print Position Title

Full Time Part Time Temporary Adjunct

Expected rate of pay: _____ Date available for work: _____

If part time, what days and hours are you available?

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
_____to_____	_____to_____	_____to_____	_____to_____	_____to_____	_____to_____	_____to_____

Have you ever been employed by Tusculum University? Yes No

Employment dates _____to_____ Position Held _____

Reason for Leaving: _____

Do you have a relative or friend who is employed by Tusculum University? Yes No

Name: _____ Relationship: _____

Name: _____ Relationship: _____

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

Are you able, at time of employment, to submit verification
of your legal right to work in the U.S.? Yes No

Verification and completion of Form I-9 must be submitted no later than three (3) business days after date of hire.



EMPLOYMENT HISTORY - Cont'd.

4. Company Name	Employment Dates	Kind of work performed and supervisors	Earnings per week, hour or month	Reason(s) for leaving
Street	from ____/____ month year to ____/____ month year	Duties:		
City State Zip		Contact or Supervisor::	Final Wage	
Type Business Phone Number				
5. Company Name	from ____/____ month year to ____/____ month year	Duties:		
Street		Contact or Supervisor:	Final Wage	
City State Zip				
Type Business Phone Number				
6. Company Name	from ____/____ month year to ____/____ month year	Duties:		
Street		Contact or Supervisor:	Final Wage	
City State Zip				
Type Business Phone Number				

May we contact the employers listed above? Yes No

If no, please mark the number of the employer you **do not** wish us to contact. 1 2 3 4 5 6

If no, please explain reason: _____

PERSONAL REFERENCES - Do Not List Relatives or Former Employers

1. Name	Address	City	State	Zip	Occupation	Phone
2. Name	Address	City	State	Zip	Occupation	Phone
3. Name	Address	City	State	Zip	Occupation	Phone
4. Name	Address	City	State	Zip	Occupation	Phone

MILITARY SERVICE RECORD (REQUIRED IF APPLYING FOR SAFETY OFFICER POSITION)

Are you a Veteran? Yes No

Branch of Service _____

Highest Rank Attained _____

Describe duties and special training _____

Are you now a member of:

National Guard Reserve

Other _____

Have you pled guilty to, pled no contest to, or been convicted of a felony within the last ten years? Yes No

If yes, please state the offense, jurisdiction, and sentence imposed or to which you agreed. (An affirmative answer will not necessarily be a bar to employment.)

Have you ever been bonded? Yes No If yes, what company?

Have you ever been denied a bond? Yes No If yes, state reason:

ACKNOWLEDGEMENT

The facts set forth above in my application for employment are true and complete. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation of my personal history through any investigative agencies or bureaus of your choice.

In making this application for employment, I also understand that an investigative consumer report may be made whereby information is obtained through personal interviews with my neighbors, friends or others with whom I am acquainted. This inquiry, if made, may include information as to my character, general reputation, personal characteristics, and mode of living. I understand that I have the right to make a written request within a reasonable time period to receive additional, detailed information about the nature and scope of any such investigative report that is made. I understand that Tusculum University has the policy of "Employment at Will". The company and/or the employee may terminate employment at any time, for any reason, with or without notice.

Signature of Applicant _____ Date _____ Last Four Digits of SSN _____

RELEASE STATEMENT

I hereby authorize any investigator of Tusculum University bearing this release, or copy thereof, within one year of its date, to obtain any information in your files pertaining to my: Education, Law Enforcement Records, and Previous Employment History.

I hereby direct you to release such information upon request of the bearer. Further, I hereby release you as the custodian of such records, and any law enforcement agency, school, college, university, or other educational institution, including officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family, or associates because of compliance with this authorization and request to release information, or any attempt to comply with it. This release is executed in full knowledge and understanding that the information is for the official use of Tusculum University. Consent is granted for Tusculum University to furnish information described above the third parties in the course of fulfilling official responsibilities.

****Fair Credit Reporting Act Disclosure Regarding Consumer Reports and Investigative Consumer Reports must accompany this application in order to be considered for employment.**

Signature of Applicant _____ Date _____ Last Four Digits of SSN _____

Tusculum University is an Equal Employment Opportunity Employer and participates in E-Verify
It is our policy to provide opportunities to all qualified persons without regard to race, creed, color, religious belief, sex, age national origin, ancestry, physical or mental handicap, or veteran's status.