



## EMPLOYMENT APPLICATION

### PERSONAL INFORMATION

Name (Last/First/Middle)	
Address	
City/State/Zip Code/County	
Home Phone	Business Phone
Cell Phone	E-mail Address

Are you legally eligible for employment in the United States?  Yes  No

Are you a current Mid-State Technical College employee?  Yes  No

Have you been employed by Mid-State Technical College in the past?  Yes  No

Mid-State Technical College does not permit immediate family members to serve in a position where they may be required to supervise or audit the work of another family member. To comply with our policy, please provide the following information:

Are you related to anyone currently employed by Mid-State Technical College?  Yes  No

If yes, please specify: Name of Relative \_\_\_\_\_ Relationship \_\_\_\_\_

### CRIMINAL HISTORY

Have you ever been convicted of a crime or do you have any pending criminal charges (felony or misdemeanor), other than a minor traffic violation?  Yes  No

If yes, please explain the nature of the conviction/charges, including the location and date.

\_\_\_\_\_  
*(A conviction or pending charge will not automatically disqualify you from employment. Each case will be considered as it relates to the position.)*

### REFERENCES

List names, titles, addresses, and phone numbers of three professional references who are not related to you.

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## EDUCATIONAL INSTITUTIONS

### High School

Name of High School	Location (City, State)	Graduated (Y/N)	Highest Grade Completed	GED/HSED (Y/N)

### College or University

Name of Institution	Location (City, State)	Dates Attended From / To		Degree / Date Received	Major/Minor
Undergraduate					
Graduate					

## OTHER TRAINING

List any specialized training (not already noted above) which you feel has advanced your educational status.

Name of Training Provider	Location (City, State)	Dates Attended From / To		Field of Study

## PROFESSIONAL OR OCCUPATIONAL LICENSES/CERTIFICATIONS

Date Issued	Name/Type of License/Certification	Organization Issuing License/Certification	Expiration

## MILITARY INFORMATION

Date Entered Month/Year	Date Discharged Month/Year	Branch	Type of Training	Rank at Discharge

## TEACHING EXPERIENCE

List the most recent experience first. Use a separate section to indicate change in subjects taught or change in rank, although in same school.

Name of School	Phone No.	Dates of Employment From (Mo/Yr) / To (Mo/Yr)		Annual Salary
Address				Rank or Title
Subjects Taught		Full-time/Part-time	Hours/Week	Total Time Worked Yr:        Mo:
Extracurricular Assignments		Reason for Leaving		

Name of School	Phone No.	Dates of Employment From (Mo/Yr) / To (Mo/Yr)		Annual Salary
Address				Rank or Title
Subjects Taught		Full-time/Part-time	Hours/Week	Total Time Worked Yr:        Mo:
Extracurricular Assignments		Reason for Leaving		

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Address				Rank or Title
Subjects Taught		Full-time/Part-time	Hours/Week	Total Time Worked Yr:        Mo:
Extracurricular Assignments		Reason for Leaving		

## NON-TEACHING OCCUPATIONAL EXPERIENCE

List the most recent position first. Attach additional page using same format, if necessary.

Employer	Phone No.	Dates of Employment From (Mo/Yr) / To (Mo/Yr)	Annual Salary	Full-time/Part-time
Address				Reason for Leaving
Position & Duties		Name/Title of Supervisor		

Employer	Phone No.	Dates of Employment From (Mo/Yr) / To (Mo/Yr)	Annual Salary	Full-time/Part-time
Address				Reason for Leaving
Position & Duties		Name/Title of Supervisor		

Employer	Phone No.	Dates of Employment From (Mo/Yr) / To (Mo/Yr)	Annual Salary	Full-time/Part-time
Address				Reason for Leaving
Position & Duties		Name/Title of Supervisor		

Employer	Phone No.	Dates of Employment From (Mo/Yr) / To (Mo/Yr)	Annual Salary	Full-time/Part-time
Address				Reason for Leaving
Position & Duties		Name/Title of Supervisor		

May we contact your present employer?  Yes  No  Currently Unemployed

Have you ever been dismissed or forced to resign from any employment?  Yes  No If yes, please explain:

## APPLICANT'S STATEMENT

I certify that all information provided herein is true and complete to the best of my knowledge. I certify that the information given by me in this application is true, correct, and complete. I understand that if any of the information provided is discovered to be false, incorrect, or misleading, or if there are misrepresentations or omissions it shall be cause for Mid-State Technical College to deny me employment or to terminate my employment once I am employed.

I authorize investigation of the statements I have made in this application. I authorize any party, including companies, schools, agencies, or persons, to give any information requested by Mid-State Technical College to evaluate my application, background, credentials, and qualifications for employment. I release all companies, schools, agencies, and persons from any liability that may result from providing, obtaining, or acting upon such information. A photocopy or facsimile copy of this authorization is as valid as the original.

I also understand that my employment at Mid-State Technical College is contingent upon the satisfactory result of a drug screen and background check.

By signing below, I certify that I have read and agree with these statements.

\_\_\_\_\_

Date

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Signature of Applicant