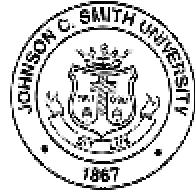


APPLICATION FOR EMPLOYMENT

JOHNSON C. SMITH UNIVERSITY
100 BEATTIES FORD ROAD
CHARLOTTE, NORTH CAROLINA 28216



Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Position(s) Applied for _____ Date _____
 _____ Date _____

Referral Source (please check all that apply)

- | | | |
|---|--|-----------------------------------|
| <input type="checkbox"/> Advertisement | <input type="checkbox"/> Employee | <input type="checkbox"/> Relative |
| <input type="checkbox"/> Walk-in | <input type="checkbox"/> Private Employment Agency | <input type="checkbox"/> Other |
| <input type="checkbox"/> Government Employment Agency | | |
- Name of Referral Source (if applicable) _____

PERSONAL	Name: Last		First		Middle	
	Address: Street		Apt #	City	State	Zip
	Telephone: Home		Work	Mobile/Beeper/Other:		
	E-mail Address:					

If necessary, the best time to call you at home _____:____ AM/PM
May we contact you at work? ? Yes ? No If yes, phone number _____ Best Time _____:____ AM/PM
If you are under 18 and it is required, can you furnish a work permit? ? Yes ? No
If no, please explain.
Are you legally eligible for employment in this country? ? Yes ? No Date available for work: _____
What is your desired salary range?
Type of employment desired ? Full- time ? Part-time ? Temporary ? Seasonal ? Volunteer?
Will you relocate if job requires? ? Yes ? No Will you travel if job requires it? ? Yes ? No
Are you able to meet the attendance requirements of the position? ? Yes ? No
Will you work overtime if required? ? Yes ? No
If no, please explain:
Driver's License number if driving is an essential job function: State _____ Number _____ Expires _____

EMPLOYMENT

Provide the following information for your past and current employers, assignments or volunteer activities, starting with the most recent (use additional sheets if necessary). Explain any gaps in employment in comments section below.

1	Employer	Telephone()	Dates Employed		Type of work performed and job responsibilities
	Address		From	To	
	Job Title		Starting Salary/Hourly Rate		
	Immediate Supervisor/ Title/ Supervisor's contact number		\$	per	
	Reason for Leaving		Ending Salary/Hourly Rate		
			\$	per	
	May we contact for a reference? yes no later				

2	Employer	Telephone()	Dates Employed		Type of work performed and job responsibilities
	Address		From	To	
	Job Title		Starting Salary/Hourly Rate		
	Immediate Supervisor/ Title/ Supervisor's contact number		\$	per	
	Reason for Leaving		Ending Salary/Hourly Rate		
			\$	per	
	May we contact for a reference? yes no later				

3	Employer	Telephone()	Dates Employed		Type of work performed and job responsibilities
	Address		From	To	
	Job Title		Starting Salary/Hourly Rate		
	Immediate Supervisor/ Title/ Supervisor's contact number		\$	per	
	Reason for Leaving		Ending Salary/Hourly Rate		
			\$	per	
	May we contact for a reference? yes no later				

Comments:

Are any of your relatives presently employed with the University?	? Yes ? No
Have you ever worked for the University? ? Yes ? No If yes, where?	Date
Have you ever been bonded?	? Yes ? No
Have you ever pled "guilty" or "no contest" to or been convicted of a crime?	? Yes ? No
If yes, please provide date(s) and details.	

Answering "YES" to these questions does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

S K I L L S	Please list any special training or certifications that are job related.					

E D U C A T I O N	Please list your education background starting with the most recent school.					
	School	Number of years completed	Degree/ Diploma	GPA/Class Rank	Major	Minor

ADDITIONAL INFORMATION: In the space provided below, please list special accomplishments, publications, awards, professional, trade, business or civic organizations and any offices held. Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, Veteran/Reserve National Guard or any other protected status.					

REFERENCES

Please list name and telephone number of three business/work references who are *not* related to you and are *not* previous supervisors. If not applicable, list three school or personal references who are *not* related to you.

Name	Telephone	Number of Years Known

Please provide any additional information you would like us to consider

APPLICANT STATEMENT

I certify that all information I have provided in order to apply for and secure work with Johnson C. Smith University is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (1) cancel further consideration of this application, or (2) immediately discharge me from the employer's service, whenever discovered.

I expressly authorize, without reservation, the University, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume, or job interview. I hereby waive any and all claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organization for furnishing such information about me.

I understand that the University does not unlawfully discriminate in employment and no question on this application issued for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state, or federal law.

I understand that this application remains current for 90 days. At the conclusion of that time, if I have not heard from the University and still wish to be considered for employment, it will be necessary to reapply.

If I am hired, I understand that absent a properly executed employment contract, I am free to resign at any time, with or without cause and without prior notice. The University reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the University is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the University's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

Do not sign until you have read the above applicant statement.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Applicant's Signature _____

Date ____/____/____



AUTHORIZATION FOR RELEASE OF RECORDS

I, _____, do hereby authorize any military organization, educational institution, governmental agency, bank or credit agency, former or present employer, division of motor vehicles (DMV) and any other person to entity to furnish to Johnson C. Smith University any and all available information requested pertaining to me. I hereby release any and all persons from any civil or criminal liability whatsoever for releasing information pursuant to the Authorization for Release of Records.

I understand that the employer does not unlawfully discriminate in employment and no question on this form is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

PLEASE PRINT

Name: Last Maiden First Middle

Social Security: _____ Driver's License #/ State _____

Date of Birth _____ Male Female Race _____

Present Address:

From/To (street) (city) (county) (state) (zip)

From/To (street) (city) (county) (state) (zip)

From/To (street) (city) (county) (state) (zip)

Applicant's Signature

Date

Latrell P. McAllister, Director
Human Resources

Voluntary Affirmative Action Information

COMPLETION OF INFORMATION BELOW IS VOLUNTARY

We consider all applicants for positions without regard to race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve/national guard or any other similarly protected status. We also comply with all applicable laws governing employment practices and do not discriminate on the basis of any unlawful criteria.

To be completed by applicant on a voluntary basis. Not for interview purposes. To be filed separately from application.

In an effort to comply with requirement regarding government record keeping, reporting and other legal obligations, which may apply, we invite you to complete this applicant data survey. Providing this information is **STRICTLY VOLUNTARY**. Failure to provide it will not subject you to any adverse personnel decision or action. Your cooperation is appreciated.

Please be advised that this survey is *not* a part of your official application for employment. It will not be used in any hiring decision. The information will be used and kept confidential in accordance with applicable laws and regulations.

PLEASE PRINT

Position(s) applied for _____ Date _____

Referral Source

Walk-in Government Employment Agency Private Employment Agency

Employee Relative School Other _____

Advertisement- Source _____

Applicant Information

Name _____ Date _____
Last First Middle

Address _____
Street City State Zip

Male Female

Please check one of the following Equal Employment Opportunity Identification Groups:

White (not of Hispanic origin) Black (not of Hispanic origin) Hispanic
 American Indian/ Alaskan Native Asian/ Pacific Islander Multiracial (having parents of different races)

For Administrative Use Only

Position(s) applied for _____ Available _____ Not Available

Other positions considered for

Hired _____ Yes _____ No

Position hired for _____ Date of hire _____

continued on back....

From the EEO job classifications listed below, which one best describes the position filled?

- | | |
|-----------------------------------|-------------------------------|
| _____ Officials and Managers | _____ Professionals |
| _____ Technicians | _____ Sales Workers |
| _____ Office and Clerical Workers | _____ Craft Workers (skilled) |
| _____ Operatives (semi-skilled) | _____ Laborers (unskilled) |
| _____ Service Workers | |

Notes _____

Completed by _____ Date _____