

Application For Employment

Faculty and Administrative Staff



8600 University Boulevard • Evansville, Indiana 47712

Personal Information (Please Print)

First Name	Middle Name	Last Name	Social Security Number	
Present Address	Street	City	State	Zip
E-Mail Address				
Telephone () ()		Alternate Number () ()		
Are you over the age of 18? Yes <input type="checkbox"/> No <input type="checkbox"/> If no, please enter birthdate.				
Position desired:			How were you referred to USI?	
Are you a U.S. Citizen? Yes <input type="checkbox"/> No <input type="checkbox"/> If no, what type of visa do you hold?			Documents which establish identity and employment eligibility will be required upon employment, and documents which establish employment eligibility may be required prior to an offer of employment.	
List any relatives you have working for USI:				
Name	Department	Relationship		
List other names under which you have worked or attended school, if applicable.				
Have you ever been convicted of a felony? (Conviction will not necessarily disqualify an applicant from employment.) <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain fully.				

Education (Begin with Bachelor's Degree)

Institution and Location	Dates Attended		Major Area Of Study	Degree Obtained	Date of Degree
	From	To			

Note: Applicants may be required to provide proof of diploma, degree, transcripts, licenses, certification, and registrations.

Scholarships and Fellowships

Institution and Location	Date

Awards and Honors

Employment History

(List all employers starting with most current employer. Please complete all sections and do not respond see resume.)

Name of Employer	Address	Telephone ()
	Date Employed:	Starting Salary:
	Date Separated:	Ending Salary:
Title of Position	Name of Supervisor and Title	
Summary of Duties _____ _____ _____		
Reason for Leaving _____ _____		
May we contact at this time? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Name of Employer	Address	Telephone ()
	Date Employed:	Starting Salary:
	Date Separated:	Ending Salary:
Title of Position	Name of Supervisor and Title	
Summary of Duties _____ _____ _____		
Reason for Leaving _____ _____		
May we contact at this time? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Name of Employer	Address	Telephone ()
	Date Employed:	Starting Salary:
	Date Separated:	Ending Salary:
Title of Position	Name of Supervisor and Title	
Summary of Duties _____ _____ _____		
Reason for Leaving _____ _____		
May we contact at this time? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Name of Employer	Address	Telephone ()
	Date Employed:	Starting Salary:
	Date Separated:	Ending Salary:
Title of Position	Name of Supervisor and Title	
Summary of Duties _____ _____ _____		
Reason for Leaving _____ _____		
May we contact at this time? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Membership in Learned and Professional Organizations

Name	Description of Organization	Offices Held

Publications, Theses, and Creative Accomplishments

(You may attach a complete bibliography to this form.)

References

(List the names of three individuals who are not former employers or relatives who have knowledge of your qualifications for the position for which you are applying.)

Name	Complete Mailing Address and Telephone Number	Position or Occupation

Your Social Security Number is requested on this form to facilitate record keeping, and to minimize effort and errors in reference to other records which require the use of the Social Security Number. You have the right to refuse to provide your Social Security Number on this form without penalty, or to request that it be removed at any time.

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize you to make investigations and inquire of my personal, employment, and criminal history as may be necessary in arriving at an employment decision. The information provided is the property of the University and will be held confidential.

I understand and agree that this application is not a contract and the acceptance of employment is not a contract of employment for a specified term. I understand and agree that I may resign my employment with USI at any time for any reason, and that my employment may be terminated at the will of USI at any time for any reason. I understand that any handbooks, manuals, policies, and procedures maintained by USI are not contractual in nature and may be amended or abolished at the sole discretion of USI at any time.

In the event of employment, I understand that false or misleading information given on my application, supporting documents, or interview(s) may result in discharge. I understand, also that I am required to abide by all rules and regulations of the University.

Applicant's Signature _____ Date _____

It is the policy of the University of Southern Indiana to be in full compliance with all Federal and State Non-discrimination and Equal Opportunity Laws, Orders, and Regulations relating to race, sex, religion, disability, age, national origin, sexual orientation, or status as a disabled veteran or veteran of the Vietnam Era. USI will provide reasonable accommodation to qualified individuals with disabilities.

The University of Southern Indiana is an Equal Opportunity/Affirmative Action Employer.

For Human Resource Use Only

Name _____	Banner ID # _____	
Requisition # _____	Date _____	Entered By _____
_____	_____	_____
_____	_____	_____
_____	_____	_____