



UNIVERSITY OF
CHARLESTON

Application for Employment



The University of Charleston is an equal opportunity employer and does not unlawfully discriminate on the basis of race, religion, national origin, color, sex, age, disability, pregnancy and pregnancy-related conditions including childbirth, or veteran status. No question on this application is used to limit or exclude any applicant from employment consideration on a basis prohibited by local, state, or federal law. Equal access to employment, services, and programs is available to all persons. Applicants requiring reasonable accommodation to the application and/or interview process should contact the Business Office, University of Charleston, 2300 MacCorkle Avenue, SE, Charleston, West Virginia or call 304-357-4730. Your opportunity for employment depends solely on your qualifications and the business needs of the University of Charleston. The fact that this application has been provided to you does not necessarily mean that The University of Charleston has any open or vacant positions and does not in any way obligate The University of Charleston to offer you employment. Do not provide any information unless the application specifically requests it.

Applicant Information

Full Name: Last First M.I. Date:
Address: Street Address Apartment/Unit #
City State ZIP Code
Phone: () E-mail Address:
Date Available: Social Security No.: Desired Salary: \$

Position Applied for:
Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO
Have you ever worked for this company? YES NO If so, when?
Have you ever been convicted of a felony? YES NO
If yes, explain:

Education

High School: Address:
From: To: Did you graduate? YES NO Degree:
College: Address:
From: To: Did you graduate? YES NO Degree:
Other: Address:
From: To: Did you graduate? YES NO Degree:

References

Please list three professional references.
Full Name: Relationship:
Company: Phone: ()
Address:

Full Name: _____ Relationship: _____

Company: _____ Phone: (____) _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: (____) _____

Address: _____

Previous Employment

Company: _____ Phone: (____) _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: (____) _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: (____) _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Disclaimer and Signature

Acknowledgements

All information provided on this application form is accurate. I understand that any misrepresentation or material omission on this form will suffice to cancel this application or to support immediate termination of employment if I am hired, whenever it may be discovered. I authorize The University of Charleston to investigate all statements provided in this application for; and, is released from liability for using such information to make employment decisions. Those persons and organizations identified are authorized, and released from liability to disclose relevant information regarding my qualifications and fitness for employment. Further, I understand that The University of Charleston may request an investigative consumer report, and if so, will do so in accordance with the Fair Credit Reporting Act.

I acknowledge and represent that I am not bound by any agreement or covenant of any kind that limits or restricts me from competing with any former employer, disclosing any confidential information or trade secrets, or contacting any former co-workers or customers with whom I have dealt.

I understand that I should provide only information that this application specifically requests and that, if I provide additional information, The University of Charleston will disqualify me as an applicant and will invalidate my application.

I understand and represent that I cannot photocopy and/or distribute this application to any person or third-party (except authorized representatives of The University of Charleston) and that, if I do so, The University of Charleston will disqualify me as an applicant, invalidate my application, rescind a job offer, and/or terminate my employment (if I already have accepted an offer when The University of Charleston discovers that I photocopied and/or distributed this application).

I understand that this application does not constitute an agreement or contract for employment. If I am employed, I understand that there is no guaranteed length of employment or vestment with The University of Charleston, and accordingly, either I or The University of Charleston can terminate the relationship at will, with or without cause or notice, at any time, so long as there is no violation of applicable federal or state law. If employed, I understand that satisfactory proof of identity and legal work authorization must be provided within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment. Finally, I acknowledge that The University of Charleston may unilaterally change its benefits, policies and procedures, and terms of employment.

I have read and fully understand the foregoing, and seek employment under these conditions.

Signature: _____

Date: _____

