



APPLICATION FOR EMPLOYMENT for FACULTY

Centenary University is committed to abiding by laws relating to equal opportunity employment. The University's policy is to afford equal employment opportunity for all persons without regard to their age, race, creed, color, national origin, ancestry, marital status, parental status, gender, affectional or sexual orientation, atypical hereditary cellular or blood trait, veteran status, physical or mental disability, or any other legally protected status. University policy calls for reasonable accommodation to be made for qualified employees with disabilities on an individual basis.

Date of Application: _____ *(Please Print Clearly and In Ink)*

Last Name	First Name	Middle Name
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Permanent Street Address: Number and Street	City	State	Zip Code
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Home Telephone	Cell Phone	Other Phone
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#Years at this address	Social Security #	Email Address
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#Years at previous address:	Street Address	City	State & Zip Code
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Position Desired	Full-time	Part-time	Available Start Date	Desired Salary
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Are you prevented from lawfully becoming employed in this country because of immigration or visa status? ___Yes ___ No

Have you ever been employed at Centenary University? ___Yes ___No If yes, from _____ to _____

Department	Position	Supervisor
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Are you currently a student at Centenary University? ___Yes ___No An Alumnus of this University? ___Yes ___No

(1) How did you learn about Centenary University: ___Advertisement ___Friend ___Employment Agency ___Relative ___Other

(2) Are you related to any employee at this University? ___Yes ___No If yes to either prior 2 questions, please provide:
Employee's name: _____ Employee's Department _____

POST-SECONDARY EDUCATION

Please list degree(s), diploma(s), certification(s).

Institution & Address	Major/Minor	Degree/Diploma

EMPLOYMENT HISTORY

Please list all experience within the last ten years, including reasons for lapses in employment. Start with your present or most recent position and you may include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status. Please complete this section **completely and do not indicate "see resume."**

If offered this position, indicate if a reference check with your Present employer may be conducted: ___Yes ___No

Current or Most Recent Employer	Street Address
City	State
Zip Code	Telephone#
Position Title	Supervisor's Name
Dates: From _____ to _____	
Reason for Leaving	Final Salary: \$
Brief Summary of Major Responsibilities	

Employer	Street Address
City	State
Zip Code	Telephone#
Position Title	Supervisor's Name
Dates: From _____ to _____	
Reason for Leaving	Final Salary: \$
Brief Summary of Major Responsibilities	

400 Jefferson Street, Hackettstown, NJ 07840 Tel: 908-852-1400 Fax: 908-850-8716

EMPLOYMENT HISTORY (continued)

Employer	Street Address		
City	State	Zip Code	Telephone#
Position Title	Supervisor's Name		Dates: From _____ to _____
Reason for Leaving	Final Salary: \$		
Brief Summary of Major Responsibilities			

Employer	Street Address		
City	State	Zip Code	Telephone#
Position Title	Supervisor's Name		Dates: From _____ to _____
Reason for Leaving	Final Salary: \$		
Brief Summary of Major Responsibilities			

Computer Skills

Word Processing	_____
Spreadsheets	_____
Databases/Graphics	_____
Other	_____

Summary of Your Qualifications for This Position



ACKNOWLEDGEMENT, RELEASE & CERTIFICATION

Please Read Carefully Since This Page Must Be Read and Signed by All Applicants

- The Immigration Reform and Control Act (IRCA 1986) requires individuals hired by the University to provide documents verifying identity and eligibility to work in this country within three (3) working days of the date employment begins. Individuals who are unable to produce the required documentation within this designated time period may be informed, in accordance with law, that their employment is terminated immediately.
- I understand that information provided in this Application for Employment will be verified.
- I hereby consent that any previous employer, character reference and any other person may furnish the University full and complete information concerning my character, work record, ability and habits and any other lawful information desired. No liability shall be incurred by any person, corporation or entity supplying such information.
- The information given by me and set forth in this Application is true to the best of my knowledge and belief. I understand that any misrepresentations and/or falsifications of information on this form may be cause for immediate termination by the University at the time of discovery.
- I understand that this Application for Employment in no way obligates Centenary University to employ me. If hired, I further understand that I may be terminated in accordance with the applicable provisions of the Centenary University Constitution.
- I understand that if I accept a position at Centenary University, I must abide by its rules and regulations.
- In compliance with the Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act, Centenary University's annual security compliance document is available on the Centenary University website at <http://www.centenaryUniversity.edu/cms/en/safety/>. If you prefer, you may obtain a hard copy of this information which contains the same information as the website by calling the Division of Student Engagement and Services at 908-852-1400.

Authorization to Obtain Former Employers' Records, Educational Records and Waiver of Liability

I hereby authorize all current and/or former employers and their employees and representatives to provide any and all information they deem appropriate regarding my employment and job performance to Centenary University and any of its employees, representatives, and agents. This information may be provided either orally or in writing. In addition to authorizing the release of any information regarding my employment, I hereby fully waive any rights or claims I have or may have against all current and/or former employers and their agents, employees, and representatives, and release them, their agents, employees, and representatives from any and all liability, claims or damages that may directly or indirectly result from the use, disclosure or release of any such information by any person or party whether such information is favorable or unfavorable to me.

Printed Name

Signature of Applicant

Date Signed