

Application for Employment

		DATE OF A	APPLICATION		
NAME					
Last		First	M	iddle	
ADDRESS		,			
	Street	City	State	Zip	
HOME PHONE	CELL PHONE		WORK PHONE		
opportunities to a qualifications and a color, religion, creveteran, or veteran cemployment policies	nondiscrimination. In o ll individuals, employmen bilities. Simpson College d ed, national or ethnic origi disability status, or any other es or practices.	t decisions at does not unlawfu in, age, sexual or r characteristic p	Simpson College ally discriminate on orientation, gender rotected by law in the	are based on the basis of sex identity, disability administration	merit, , race ity or of its
Position(s) applied	for				
Referral sources:	Advertisement	Friend	Re	elative	
	Employment Agency		Other		
GENERAL INFO	ORMATION:				
Are you available to	o work? Full Time		Part Time		
Have you filed an a	pplication here before? Ye	es No	Date		
If you become emp the United States?	loyed by Simpson College, Yes			legal right to wo	ork in

In compliance with the Immigration Reform and Control Act of 1986, I understand that I will be required to, upon being made an offer of employment, produce documents which are specified by the federal government, to establish my identity and right to work in the United States. Theses documents must be produced no later than seventy-two (72) hours after beginning paid employment.

GENERAL INFOR	RMA'	TION	V (con	ıt):									
Do you hold a valid d	river's	s licen	ise? Y	es			No _	·					
Have you ever been c If yes, describ				•				No					
Are you required to re If yes, describe in full					any jur	isdic	tion?	Yes	·		No		
EDUCATION: (Fill in highest level	achie	ved.)											
		High	n Scho	ol	Co	llege	e/Uni	versity	Gra	Graduate/Professional			
School Name													
Years Completed (Circle)	9	10	11	. 12	1	2_	3	4	1	2	3	4	
Diploma/ Degree				•			•						
Describe any speciali may be helpful to Sin	zed ed	lucatio	onal tr	aining, e consideri	xtra-cu	rricu	lar ac	tivities, and	d hono	rs rec	eived	that you feel	
Do you have experier	ice wi	th any	y of the	e followi	ng com	pute:	r appl	ications?					
☐ Microsoft Word		Yrs	s Exp			Mi	icroso	oft Access		Yrs E	exp		
☐ Microsoft Excel		Yrs	s Exp .	.		M	icrosc	oft Window	7S	Yrs E	Exp		
☐ Microsoft Power	Point	Yr	s Exp									·	
REFERENCES: List three persons wh	o have	e knov	wledge	e of your	work a	bility	y and	qualificatio	ons.				
~~		4 7 7	, T					Very V		D	alatio	L :	

Name	Address/phone	Years Known	Relationship

EMPLOYMENT EXPERIENCE:

every question in this s employers, the correct tele***********	enhone numbers of pa	ast employe	ers are cr	itical.	
Most recent employer: Are you currently working If yes, may we contact?	g for this employer?			No No	
Employer name				Phone	
Address: Street	C	ity		State	Zip
Dates employed	From		·	То	
Job Title				Supervisor	
Starting Salary				Ending Salary	
Duties					
Reason for leaving					
*******	*******	******	******	*******	·**************
Employer name				Phone	
Address: Street	C	ity	· · · · · · · · · · · · · · · · · · ·	State	Zip
Dates employed	From			То	
Job Title	· .		•	Supervisor	
Starting Salary				Ending Salary	· · ·
Duties				1.00	
Reason for leaving					
*******	******	*****	*****	**********	*******
Employer name				Phone	
Address: Street	C	ity		State	Zip
Dates employed	From			То	
Job Title				Supervisor	
Starting Salary				Ending Salary	
Duties					
Reason for leaving					

If you need additional space, continue on a separate sheet of paper.

Please make comments that you feel are relevan necessary.	t to your application. Ask for an	addition	al page, if
Simpson is committed to assisting all members of t safety and security. Simpson's annual security com at http://www.simpson.edu/security/statistics/statta	pliance document is available on the		
If you would like to receive a printed copy that con Office in Brenton Student Center or you can reques 1711.		-	•
The website contains information on campus secur Security Staff authority, crime reporting policies, d about security on campus.	• •	-	
It also contains statistics for the three previous cale campus, in certain off-campus buildings, in propert property within or immediately adjacent to and acc by law and is provided by the Security Department	ty owned or controlled by Simpson, a tessible from the campus. This inform	and on pi	ublic
APPLICANT'S CERTIFICATION AND RELE	CASE:		
I hereby certify that the information set forth in the a understand that if I am employed, and any such statem been omitted, such false statements or omissions will be	nents and/or answers are found false or	that info	rmation has
I authorize, an investigation of all statements contained well as present and previous employers I have providecision. I also authorize the person or organizations I my previous employment, education or any other infor- any of the subjects covered by the Simpson College app	rided, as may be necessary in arriving isted on the application form to give information they may have, personal or other	g at an e formation	employment concerning
I understand that my employment at Simpson College either party.	would be "at-will" and could be termi	nated at a	ıny time by
Signature of applicant	Date		
COMPLETE THIS SECTION ONLY AFTER I		TEW Yes	No
you?			
Do you understand these requirements?	·		
Can you perform the requirements of this job with or w	ithout reasonable accommodation?		-
You are requested <u>not</u> to disclose information about a interfere with your ability to do the job for which yo disabled and wish Simpson College to consider special job functions; <u>you may</u> , <u>but are not required to</u> , s appropriate.	ou have made application. On the ot arrangements that would assist you in	her hand, performii	, if you are ng essential
Comments	4,0,0		
Signature	Date		