



Faculty Student Association
 State University College at Fredonia
 Gregory Hall
 Fredonia, New York 14063

APPLICATION FOR EMPLOYMENT

Name: _____ Date: _____

Address: _____ Telephone: _____

Apt #: _____ Cell Phone: _____

City, State, Zip: _____

E-Mail Address: _____

Are you legally authorized to work in the United States? _____ Yes _____ No

Position Applying For: _____

Desired Pay: _____

Full Time: _____ Part Time: _____ Either: _____

Date Available To Start: _____

Days & Hours Available To Work:

Monday: _____

Tuesday: _____

Wednesday: _____

Thursday: _____

Friday: _____

Saturday: _____

Sunday: _____

We are an equal opportunity employer and federal and state laws prohibit discrimination in employment practices on the basis of age, race, creed, color, national origin, sex, disability, marital status, or citizenship status.

(Continue Application Inside)

Employment: (List employers starting with present or most recent)
(If more space is needed attach additional sheets)

Company _____	Dates Of Employment _____
Address _____	Telephone _____
_____	Start _____ Leave _____
Job Title _____	Salary _____ Salary _____
Supervisor _____	Reason _____
	For Leaving _____
Duties _____	

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Address _____	Telephone _____
_____	Start _____ Leave _____
Job Title _____	Salary _____ Salary _____
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Job Title _____	Salary _____ Salary _____
Supervisor _____	Reason _____
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Duties _____	

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Education:

Name and Address Of School - Course Of Study	Last Year Completed	Degree/
Diploma		
High School: _____	1 2 3 4	_____
Course: _____		
College: _____	1 2 3 4	_____
Course: _____		
Trade: _____	1 2 3 4	_____
Course: _____		
Other: _____	1 2 3 4	_____
Course: _____		

U.S. Military Service:

Date Of Discharge: _____ **Did you receive a Dishonorable Discharge?** _____
("A Dishonorable Discharge is not an absolute bar to employment and other factors will affect a final employment decision.")

Have you ever been convicted of a crime? _____ **Yes** _____ **No**
and, if so, please explain:

(A conviction will not necessarily disqualify an applicant from employment and the employer will consider all relevant factors).

References: (Not a relative)

Name: _____	Phone: _____
Address: _____	Years Known: _____

Name: _____	Phone: _____
Address: _____	Years Known: _____

Name: _____	Phone: _____
Address: _____	Years Known: _____

(Continue Application Next Page)

Conditions For Employment

Please read the following statements carefully as they constitute conditions for employment:

1. The information that I have provided on this application is accurate and true to the best of my knowledge.
2. I affirm that I have read this completed application and I have not withheld any information or response to any questions and that the information I have furnished is true and correct. I understand that any misrepresentation or omission of a fact on my application or during the interview process regardless of when such misrepresentation or omission is discovered, may result in the refusal of employment, or if employed, immediate termination.
3. The schools, current and prior employers, references, and other organizations or employers named in this application are authorized by me to verify the information I have provided and to provide the Company with information that may be requested by it to arrive at an employment decision. I am willing that a photocopy of this authorization be accepted with the same authority as the original. I hereby waive and release all persons, schools, current and prior employers and other organizations from any liability arising from the disclosure of any of the above information whether in writing or orally, and further waive and release the Company from any liability arising from reliance on the aforementioned information or the use, publication, or retention of such information within the context of its applicant review procedures.
4. I agree to protect the Company's confidential information, trade secrets, and names or addresses of clients, and I will not disclose to the Company any confidential information of others.
5. I will be able, if hired, to certify that I am authorized to work in the United States of America, and understand that in accordance with the Immigration Reform and Control Act that I will be required to provide timely documentation of identity and employment eligibility.
6. In the event that I am employed, I agree to conform to the Company's rules and regulations, I understand and agree that if I am employed in a non-bargaining unit position, I shall be employed on an at-will basis. As an at-will employee, I understand and agree that either the Company or I can terminate our employment relationship at any time for any reason with or without notice and without cause. I understand and agree that, although over the course of my employment, other terms and conditions of my employment may change, the at-will term of my employment will not change. I understand that no representative of the Company has any authority to make an agreement contrary to the foregoing or to enter into any agreement for employment for any specific period of time.

Signature of Applicant _____ **Date** _____