

Seward County Community College

----Staff Application for Employment----

P E R S O N A L	Last Name	First	Middle	Date
	Street Address			Home Phone
	City, State, Zip			Business Phone
	Have you ever applied for employment with us? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Month and Year			E-mail address
	Position Desired			Pay Expected
	Are you able to work full-time? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, what hours can you work?			Will you work overtime if asked? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Are you legally eligible for employment in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No			When will you be able to work?
	Other special training or skills (languages, machine operations, etc)			
	How did you learn of our organization?			
	Are you related to anyone employed at Seward County Community College? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, to whom?			
	Do you have a valid drivers license? <input type="checkbox"/> Yes <input type="checkbox"/> No			

E D U C A T I O N	School: Name and Location	Course of Study	No. Of Years Completed	Did You Graduate?	Degree of Diploma
	College or Vo-Tech			<input type="checkbox"/> Yes <input type="checkbox"/> No	
	High School or GED			<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Other			<input type="checkbox"/> Yes <input type="checkbox"/> No	

Membership in Professional or Civic Organizations (Exclude those which may disclose race, color, or national origin)

Have you ever been convicted of a felony? If yes, explain:

List all employment for the past ten (10) years (more forms are available if needed):

Previous Employment	Please give accurate, complete full-time and part-time employment record. Start with present or most recent employer.
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1	Company Name	Telephone
	Address	Employed (State Month and Year) From _____ To _____
	Name of Supervisor	Weekly Pay Start _____ Last _____
	State Job Title and Describe Your Work	Reason for Leaving

2	Company Name	Telephone
	Address	Employed (State Month and Year) From _____ To _____
	Name of Supervisor	Weekly Pay Start _____ Last _____
	State Job Title and Describe Your Work	Reason for Leaving

3	Company Name	Telephone
	Address	Employed (State Month and Year) From _____ To _____
	Name of Supervisor	Weekly Pay Start _____ Last _____
	State Job Title and Describe Your Work	Reason for Leaving

4	Company Name	Telephone
	Address	Employed (State Month and Year) From _____ To _____
	Name of Supervisor	Weekly Pay Start _____ Last _____
	State Job Title and Describe Your Work	Reason for Leaving

We may contact the employers listed above unless you indicate those you do not want us to contact	DO NOT CONTACT
	Employer Number(s) _____ Reason _____

Give three references who have knowledge of your character, personality and/or of work ability.

Complete Name	Complete Address/Phone number	Official Position

IT IS UNDERSTOOD AND AGREED that any misrepresentation by me in this application will result in cancellation of this application and if employed shall be sufficient cause for separation from the College's employment. I hereby authorize any company or institution with who I have been associated to furnish Seward County Community College information concerning my employability which they have on record, and do hereby release the company or institution and all individuals connected therewith from all liability for any damage whatsoever incurred in furnishing such information.

IN CONSIDERATION OF MY EMPLOYMENT, I agree to conform to the rules and regulations of Seward County Community College and the State of Kansas.

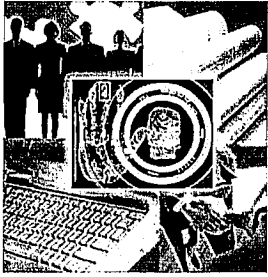
Signature of Applicant

Date

Application is valid for 60 days. Contact the Human Resources office if you wish your application to be in consideration of a specific job opening.

Kansas is an at-will state, and employment is at the will of the employer, and either the employer or the employee may at any time terminate the employment relationship without cause.

Seward County Community College does not discriminate on the basis of race, religion, color, national origin, gender, age, or disability in admission or access to, or treatment or employment in, its programs and activities.



Credentiaing and Background Investigation

3017 - SEWARD COUNTY COMMUNITY COLLEGE-EMPLOYEE EMPLOYEE DISCLOSURE & RELEASE

Please Print Legibly

APPLICANT'S FULL NAME _____

Any Other Names Used (Including Maiden Name) _____

Social Security No. ____ / ____ / ____ Date of Birth¹ _____

Current Address _____

City _____ State _____ Zip _____

Driver's License State _____ No. _____

Phone Number: _____

Name of High School, College, University or Institution of Professional Training where you completed the highest level (GED – provide state) _____

Campus Name _____ Campus City _____ Campus State _____

Name on GED or under which you graduated _____

Dates of Attendance and/or Graduation _____
Year(s) Attended Year Graduated/GED Completed

My present employer may be contacted for a job reference. Yes No

Please provide all locations where you have resided for the past seven (7) years, starting with your current residency.

Table with 5 columns: City, State, Dates, From, To. Rows 1-4 for residential history.

Pursuant to the requirements of the Fair Credit Reporting Act, I acknowledge that a credit report, consumer report² and/or investigative consumer report³ may be made in connection with my application for employment with prospective employer, including contract for services. I understand that these investigative background inquiries may include credit, consumer, criminal, driving, prior employment and other reports. These reports may include information as to my character, work habits performance and experience, along with reasons for termination of past employment from previous employers. Further, I understand that a prospective employer and PreCheck, Inc. may be requesting information from various federal, state, and other agencies which maintain records concerning my past activities relating to my educational/school records, driving, credit, criminal, civil and other experiences, as well as claims involving me in the files of insurance companies.

I authorize, without reservation, any party or agency contacted by PreCheck, Inc. to furnish the information mentioned above. A photocopy of this authorization shall have the same effect as the original.

I understand the information obtained will be used as one basis for employment/contract for services or denial of employment/contract for services. I hereby discharge, release and indemnify the prospective employer, PreCheck, Inc., their agents, servants and employees, and all parties that rely on this release and/or the information obtained with this release from any and all liability and claims arising by reason of the use of this release and dissemination of information that is false and untrue if obtained from a third party without verification.

It is expressly understood that the information obtained through the use of this release will not be verified by PreCheck, Inc. The authorization granted herein shall be effective throughout the term of my employment.

I have read and understood the above information, and assert that all information provided by me is true and accurate.

Applicant's Signature _____ Date _____

Upon your written request within a reasonable period of time, the investigative agency compiling a report will make a complete and accurate disclosure of the nature and scope of the investigation. In addition, if you are denied employment, either wholly or partly because of information contained in a consumer report, a disclosure will be made to you of the name and address of the investigative agency making such a report.

¹ The Age Discrimination in Employment Act of 1987 prohibits discrimination on the basis of age with respect to individuals who are at least 40 years of age. This information is for consumer report purposes only.
² A "Consumer Report" may consist of employment records, educational verification, licensure verification, driving record, previous address and
³ Public records relative to criminal charges.
An "Investigative Consumer Report" means a consumer report or portion thereof in which information on a consumer's character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with persons having knowledge.