



ALABAMA COMMUNITY COLLEGE SYSTEM

APPLICATION NO. _____

APPLICATION FOR EMPLOYMENT

GADSDEN STATE COMMUNITY COLLEGE

Position Information	Title of position for which you are applying:			Date of Application		
	Last Name		First Name		Middle Initial	
Personal Information	Address		City	State	Zip	
	Contact Information					
	Phone: Home	Work	Cell	E-mail Address		
	School/College		Dates Attended From / To	Major	Minor	Degree(s) Earned
Secondary and Postsecondary Education	High School/ GED					
	College					
	College					
	College					
	Other (Specify)					
Additional Information	<p>Are you currently employed or have you been employed within the last twelve months at an Alabama Community College System college?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, list the name of the college(s) and dates: _____</p>					
	Please list most recent employment experience first.					
Employment History	Employer		Telephone Number		Job Duties	
	Address		Dates of Employment			
	Title		Hourly Rate/Salary			
	Reason for Leaving					

Employment History (Continued)	Employer	Telephone Number	Job Duties
	Address	Dates of Employment	
	Title <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	Hourly Rate/Salary	
	Reason for Leaving		
Employment History (Continued)	Employer	Telephone Number	Job Duties
	Address	Dates of Employment	
	Title <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	Hourly Rate/Salary	
	Reason for Leaving		
Employment History (Continued)	Employer	Telephone Number	Job Duties
	Address	Dates of Employment	
	Title <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	Hourly Rate/Salary	
	Reason for Leaving		
Employment History (Continued)	Employer	Telephone Number	Job Duties
	Address	Dates of Employment	
	Title <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	Hourly Rate/Salary	
	Reason for Leaving		

May we contact your current employer? Yes No

Skills, Awards, Certificates or Professional Activities	

References	Please list three references, other than relatives, who can provide information verifying qualifications, character, or work experience.		
	Name and Title	Address	Phone Number
Family Relationship	For the purposes of disclosure, relative includes any person related within the fourth degree of affinity or consanguinity to any job, position, or office of profit with state or with any of its agencies.		
	Are you a relative of any employee in the Alabama Community College system, including Gadsden State Community College, or any member of the Alabama Community College Board Trustees? Yes No		
	If yes, list the name(s), relationship, and employer/position of relative(s):		
Felony Conviction(s)	Have you ever been convicted of or pled no contest or guilty to any felony or any crime involving theft, dishonesty, violence, or sexual misconduct? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	If yes, explain below:		
Consent Agreement	I represent and warrant that the information I have given on this application is full and true to the best of my knowledge and belief. I further acknowledge that I understand that I must provide documented verification of education, experience, and required certifications and/or licensures. And further, I represent and warrant that I have answered fully and truthfully all questions regarding criminal convictions/records. I understand that any offer of employment is contingent upon a satisfactory criminal background investigation and I hereby authorize my employing authority within the Alabama Community College System and/or its assigns to conduct a criminal background history investigation. I understand that in the event a conviction for a felony or any crime involving moral turpitude is found that the procedures established for the Board of Trustees policy concerning criminal background checks will be followed. I further understand that I will be responsible for the cost of said criminal background check. I hereby expressly request, and give permission to, former employers and any persons who may have pertinent information concerning this application to furnish such information to college officials. I agree to hold such persons harmless, and I do hereby release them from any and all liability for damage of any nature whatsoever for furnishing such information. I understand that failure to provide full and true information on this application may result in disqualification or dismissal.		
	Signature of Applicant _____		Date _____

Are you a member of the Alabama Community College System Applicant Pool? Yes No

Return to: Gadsden State Community College
 Attention: Human Resources
 P. O. Box 227
 Gadsden, AL 35902-0227
 Phone: (256) 549-8235 Fax: (256) 439-6812

It is the official policy of the Alabama Community College System, including postsecondary institutions under the control of the Board of Trustees, that no person in Alabama shall, on the grounds of race, color, disability, sex, religion, creed, national origin, age, or other classification protected by Federal or State law, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program, activity, or employment. (Each institution will make reasonable accommodations for qualified disabled applicants or employees.)

The following information is gathered solely for reporting purposes and will not be used to evaluate the applicant's qualifications, suitability, or desirability for employment.

Name:

Last

First

Middle

Date of Birth

Social Security Number

Are you Hispanic or Latino? Yes No

Ethnic Background (check all that apply):

Gender (check one):

- White
- Black or African American
- Asian
- Unknown
- Native Hawaiian or Other Pacific Islander
- American Indian or Alaska Native

- Male
- Female

MISCELLANEOUS INFORMATION

Have you ever been employed by the College? Yes No

Position

Employed from

to