



# APPLICATION FOR EMPLOYMENT

## Wallace State Community College

<b>Position Information</b>	Title of position for which you are applying:							Date of Application	
	Last Name			First Name			Middle Initial		
<b>Personal Information</b>	Address			City		State		Zip	
	<b>Contact Information</b>								
	Phone: Home		Work		Cell		E-mail Address		
<b>Secondary and Postsecondary Education</b>		School/College			Dates Attended From / To		Major	Minor	Degree(s) Earned
	High School/ GED								
	College								
	College								
	College								
	Other (Specify)								
<b>Additional Information</b>	<b>Are you currently employed or have been employed within the last twelve months at an Alabama Community College System college.</b> <input type="checkbox"/> Yes <input type="checkbox"/> No  If yes, list the name of the college(s) and dates: _____								
	<b>Please list most recent employment experience first.</b>								
<b>Employment History</b>	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		
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	<b>Please list three references, other than relatives, who can provide information verifying qualifications, character, or work experience.</b>		
	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 (name of college), or any member of the Alabama Community College System Board of Trustees? <input type="checkbox"/> Yes <input type="checkbox"/> 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. <b>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.</b> 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: Wallace State Community College**  
**Attention: Human Resources**  
P.O. Box 2000  
Hanceville, AL 35077  
256-352-8029

It is the policy of the Alabama Community College System, including all postsecondary community and technical colleges under the control of the Alabama Community College System Board of Trustees, that no employee or applicant for employment or promotion, on the basis of any impermissible criterion or characteristic including, without limitation, race, color, national origin, religion, marital status, disability, sex, age, or any other protected class as defined by federal and state law, shall 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.)

**REQUEST, AUTHORIZATION, CONSENT, AND RELEASE  
FOR BACKGROUND INFORMATION**

I have been informed and acknowledged that on December 13, 2007 the State Board of Education adopted Policy 623.01 requiring criminal background checks for all new and current employees.

I understand that I may voluntarily consent to the use of my social security account number for the purpose of conducting a criminal background check. I further understand that my voluntary consent to use my social security account number is being requested for purposes of conducting a criminal background check, pursuant to the authority of the Alabama Community College System Board of Trustees policy regarding criminal background checks. I understand that neither the Alabama Community College System nor any employing authority within the Alabama Community College System will deny me any right, benefit or privilege provided by law because of my refusal to voluntarily consent to the use of my social security account number for the limited purpose of conducting a criminal background check pursuant to the Alabama Community College System Board of Trustees policy regarding criminal background checks.

\_\_\_\_\_ I voluntarily consent to the use of my social security account number for the limited purpose of conducting a criminal background check. Social Security # \_\_\_\_\_

\_\_\_\_\_ I do not consent to the use of my social security account number for the limited purpose of conducting a criminal background check.

The information I have given in my employment application, interviews, and/or related resumes and documents is true, complete, and accurate.

I understand and agree that if employed, and/or during any period of employment, any false statements, misrepresentations of facts, or omission made by myself become known, my employment shall be subject to immediate termination.

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 have read and completely understand this release.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant's Name (Please print): \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

Applicant's Birthday: \_\_\_\_\_



# WALLACE STATE HANCEVILLE

## EQUAL EMPLOYMENT OPPORTUNITY INFORMATION

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:** \_\_\_\_\_

**Ethnic Background (check one):**

- Native American
- White, not of Hispanic origin
- Hispanic
- Black, not of Hispanic origin
- Asian/Pacific Islander
- Multi-racial
- Other

**Gender (check one):**

- Male
- Female

### MISCELLANEOUS INFORMATION

Have you ever been employed by the College?  Yes  No

**Position:** \_\_\_\_\_ **Employed: From** \_\_\_\_\_ **To** \_\_\_\_\_

**Supervisor/Department Head:** \_\_\_\_\_

**Please give name(s), relationship, and department of relative(s) presently employed by Wallace State Community College:**

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