

APPLICATION FOR EMPLOYMENT

Please contact the Human Resources Department if you need assistance or reasonable accommodations in the application or hiring process.

Department of Human Resources
P.O. Box 2900, Mount Gay, WV, 25637
PH: 304-896-7441 FAX: 304-792-7096

SOUTHERN WEST VIRGINIA COMMUNITY
AND TECHNICAL COLLEGE

Date Position for which applying

Which location(s) are you willing to work? Boone Campus Lincoln Site Logan Campus Williamson Campus Wyoming/McDowell Campus Any

Rate of pay expected? Per hour Per month Per year

Would you work full time? Yes No Part time? Yes No If part time, specify days/hours

Have you worked for Southern before? Yes No If yes, when?

Do you have a relative working for Southern? Yes No If yes, provide name

If your application is considered, what date will you be available to start?

Personal Information

Last Name First Name SSN

Address Phone Number (Day)

City State Zip Code Phone Number(Alt)

Are you 18 years or older? Yes No

DO NOT FILL OUT BEFORE READING

READ CAREFULLY BEFORE ANSWERING ANY QUESTIONS IN THIS BLOCKED AREA. DO NOT ANSWER ANY QUESTIONS UNLESS THE BOX NEXT TO THE QUESTION IS CHECKED, thereby indicating that the requested information is needed for the bona fide occupational qualification or other legally permissible reason. Conviction record will not necessarily be a bar to employment.

Have you ever been bonded or had a security clearance for a job? Yes No
If yes, explain

Have you ever been convicted of a misdemeanor? Yes No
If yes, explain

Have you ever been convicted of a felony? Yes No
If yes, explain

Policy Statement-Nondiscrimination of Basis of Sex and Equal Employment Opportunity

It is the policy of Southern West Virginia Community and Technical College, not to discriminate on the basis of sex in its education programs, activities, employment policies, or admission of students to any program of study as required by Title IX of the 1972 Education Amendments. Additionally, the College upholds and complies with the Civil Rights Act of 1964, as amended, which prohibits discrimination in employment practices because of race, religion, color, national origin, ancestry, sex, age, or handicap. Inquiries regarding compliance with Title IX and/or The Civil Rights Act may be directed to the Director of Human Resources, Southern West Virginia Community and Technical College by calling (304) 896-7408 or by contacting the Director of the Office of Civil Rights, Department of Health, Education and Welfare, Washington, D.C.

Work Experience

List below all present and past employment, beginning with your most recent. List additional work experience, if necessary, on a separate sheet using the format below.

Business Name Starting Date of Employment
Address Ending Date of Employment
City State Zip Code
Job Title Name of Supervisor Supervisor's Phone
May we contact this person? Yes No If not, who may we contact? Phone
Reason for leaving
Describe in detail the work you did.

Business Name Starting Date of Employment
Address Ending Date of Employment
City State Zip Code
Job Title Name of Supervisor Supervisor's Phone
May we contact this person? Yes No If not, who may we contact? Phone
Reason for leaving
Describe in detail the work you did.

Business Name Starting Date of Employment
Address Ending Date of Employment
City State Zip Code
Job Title Name of Supervisor Supervisor's Phone
May we contact this person? Yes No If not, who may we contact? Phone
Reason for leaving
Describe in detail the work you did.

Record of Education

High School

Name	<input type="text"/>		
Address	<input type="text"/>		
City	State	Zip Code	<input type="text"/>
Major/Minor	Last Year Completed	<input type="text"/>	

University or College

Name	<input type="text"/>		
Address	<input type="text"/>		
City	State	Zip Code	<input type="text"/>
Major/Minor	Degree Received	<input type="text"/>	

University or College

Name	<input type="text"/>		
Address	<input type="text"/>		
City	State	Zip Code	<input type="text"/>
Major/Minor	Degree Received	<input type="text"/>	

Graduate School

Name	<input type="text"/>		
Address	<input type="text"/>		
City	State	Zip Code	<input type="text"/>
Major/Minor	Degree Received	<input type="text"/>	

Business or Trade

Name	<input type="text"/>		
Address	<input type="text"/>		
City	State	Zip Code	<input type="text"/>
Major/Minor	Degree Received	<input type="text"/>	

Other Knowledge, Skills, and Abilities

Describe below any other experiences, skills, certifications, or qualifications which you feel would especially qualify you for the position.

<input type="text"/>
<input type="text"/>
<input type="text"/>

Type(wpm)	<input type="text"/>	Shorthand(wpm)	<input type="text"/>	Business Machines	<input type="text"/>	
Are you licensed to drive a car?	<input type="radio"/> Yes	<input type="radio"/> No	If yes, in what State?	<input type="text"/>	License No.	<input type="text"/>
List Driver's License Endorsement(s) if applicable:	<input type="text"/>					

Military Service Record

Have you been in the U.S. Armed Forces? Yes No If yes, what branch?
Dates of duty From To Rank at Discharge

List duties in service, including special training (Unless listed above under Record Of Education)

Personal References

Name Occupation
Address
City State Zip Code
Phone

Name Occupation
Address
City State Zip Code
Phone

Name Occupation
Address
City State Zip Code
Phone

To Be Read And Signed By Applicant

I certify that this application was completed by me; that all entries on it and information in it are true and complete to the best of my knowledge; and that I am currently legally eligible for employment in the United States and am prepared to present documentation to support that fact prior to an offer of employment. I authorize you to make such investigation and inquiries of my personal, employment, financial or medical history and other related matters as may be necessary in arriving at an employment decision. (Inquiries regarding medical history will be made only if and after conditional offer of employment has been extended.) I hereby release employers, schools, colleges, health care providers and other persons from all liability in responding to inquiries and releasing information in connection with application.

In the event of employment, I understand that any falsification, omission, or misleading information given in this application or interview(s) will be grounds for immediate dismissal. I understand that I am required to abide by all rules and regulations of the College. I understand and agree also, that my employment and compensation can be terminated with or without notice at anytime at the option of either Southern West Virginia Community Technical College or myself.

PLEASE PRINT AND SIGN APPLICATION. MAIL OR FAX TO:

Southern West Virginia Community and Technical College
Department of Human Resources
P.O. Box 2900, Mount Gay, WV, 25637
Fax: 304-792-7096

Be sure to include copies of your college transcripts, licenses, or certifications with your application for employment.

Applicant's Signature

Date