

APPLICATION FOR EMPLOYMENT

John Carroll University (JCU) is an affirmative action, equal opportunity employer. The University is committed to diversity in the workplace and strongly encourages applications from women and minorities.

(PLEASE PRINT)

Last Name	First Name		Middle Name
Address	City	State	Zip Code
Telephone Numb	er(s) Email Address	Social Securi	ty Number
	checking purposes, please indicate other names (for exa	mple: maiden name, nickn	name, etc.) under
Position Applied	d For	Date of Application	
How did you lea	arn about us?		
☐ JC	U Website Newspaper Internet Job Fair	Other	
Best time/place	e to contact you:		
Date available to Desired salary	for work: Part T range:	ime 🗌 Temporary/Sea	sonal
☐ Yes ☐ No	Are you at least 18 years of age and can you provide p	roof of eligibility to work?	
☐ Yes ☐ No	Have you ever filed an application with JCU before? If	yes, give date:	
☐ Yes ☐ No	Have you ever been employed with JCU before? If yes	, give dates: From	_to
☐ Yes ☐ No	Do any of your relatives work with JCU? If yes, give na	me, relationship, location,	and department
☐ Yes ☐ No	If a job offer is extended, do you agree to take a univer requirements of the job if such an exam is required for fundamentally similar jobs?		
☐ Yes ☐ No	Will you submit to a screening test, if required, which de alcohol, or other physically or mentally impairing substa		gs,
☐ Yes ☐ No	Are you available to work overtime, if asked?		
☐ Yes ☐ No	If required, can you work shifts?		
☐ Yes ☐ No	Are you physically and/or otherwise able to perform (with the essential duties of the job for which you are applying		ccommodations)
☐ Yes ☐ No	If the job for which you are applying involves driving, do issued by the state of Ohio?	o you possess a valid drive	er's license
☐ Yes ☐ No	If the job for which you are applying involves driving a rever been suspended, revoked, had any restrictions pla moving violation convictions in the last 5 years? If yes,	aced on it and/or have you	

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School	Name & Address	Course of Study	Years Complete	Diploma/Degree
High				
School				
Junior/Community				
College				
Undergraduate				
College				
Graduate/				
Professional				
Other/Vocational (Specify)				

WORK EXPERIENCE Please list your work experience for related military service assignments		ırt with your p	resent or last job, incl	uding any	/ job-
NOTE: A resume does not	substitute for this ap	plication.	Please complete	all sect	ions.
Employer		F	Work Performed		
		mployed			
Address	From	То			
Telephone Number(s)					
Job Title		. 10			
Supervisor	Starting	ate/Salary Final			
Reason for Leaving			Mayyyya aantaat2		
			May we contact?	Yes	No
Employer			Work Performed		
		mployed			
Address	From	То			
Telephone Number(s)				,	
Job Title	Hoursty D	ete/Colom/			
Supervisor	Starting	ate/Salary Final			
Caparina	J. Landing				
Reason for Leaving			May we contact?	Yes	No
Employer			Work Performed		
Employer	Date Fr	mployed	Work i chonica		
Address	From	То			
Telephone Number(s)					
Job Title					
		ate/Salary			
Supervisor	Starting	Final			
Reason for Leaving			May we contact?	Yes	No

Knowledge, Skills and Abilities (please check all of the skills and abilities you possess and, if applicable, your skill level)

Office / Clerical / Se WORD PROCESSIN Microsoft Word Other ELECTRONIC MAIL Outlook Lotus	NG	N/A	Basic Basic Basic	Inter	Adv	SPREADSHEET Excel Other		N/A	Basic	Inter	Adv
DATABASE MANAG Access Oracle Other		N/A	Basic	Inter	Adv	DESKTOP PUBL Photoshop PageMaker Other_		N/A	Basic	Inter	Adv
WEBPAGE DEVELO Contribute Adobe Front Page Other	JPMEN I					Calculator/10-Ke	y				
Physical Plant/Faci	lities/Skill					1 -					
☐ Carpenter ☐ Painter ☐ Electrician] HVA] Plum] Othe		nician		Security Truck Driver		∐ Gro □ Oth -	oundske ner	eper	
Other Education, T					kills:						
(Please list/include d	late receiv	ed & Ir	nstitutior	n name)							
Hava var avar b		.: - 4 1	-£	الدم مصا	41		مناعاماني	-0 <u></u>	7.4		
Have you ever be	en conv	rictea	or a cr	ime otr	ner tna	n a minor traffic	violatio	n? L] Yes	☐ No	
If yes, please give da	ate(s) offe	nse(s)	and ch	arge(s).	*						
ii yoo, pioaco givo at	<i>x</i> (0), 0110	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, and on	iaigo(o).							
References											
Give the names, addre	sses and p	hone n	umbers c	of three re	eferences	not related to you (v	vork-relate	d refere	ences pre	eferred)	
			. =							. 7	Years
Name		Ad	ldress			Phone Number	Relatio	nship/(Occupati		Known
	i										

^{*}A conviction will not automatically disqualify you from employment. Each conviction will be considered with respect to time, circumstances, and relationship to job applied for. John Carroll University reserves the right to perform criminal background checks, driver's license checks and/or other background checks it deems necessary.

APPLICANT'S CERTIFICATE AND RELEASE

(Read Carefully Before Signing)

All information provided by me in support of my application for employment is true and correct to the best of my knowledge. I understand that misrepresentations or omissions will constitute sufficient grounds for rejection or for subsequent dismissal if I am hired.

I hereby authorize any current or former employer, school, person, firm, corporation, consumer or credit reporting agency, or government agency to answer any and all questions and to release or provide any information within their knowledge or records, and I agree to hold any or all of them blameless and free of any liability for releasing any truthful information that is within their knowledge or records, and I also agree to hold The University blameless and free of any liability for using any Information received from such parties in making an employment decision regarding me.

The University is hereby authorized to release to any other firm or person with whom I may seek employment, any and all information concerning my employment or application, including any information received from a third party as a result of an inquiry such as described in the foregoing paragraph, and I agree to hold the University blameless and free of any liability for releasing any such information.

In the event of employment, I understand that I will be required to abide by all rules and regulations of the University (including the signing of any required agreements dealing with inventions, confidential information, or any other terms or conditions of employment) which are now in effect or may be established in the future.

In compliance with the immigration law, I understand that if I am offered a job by the University, my employment will be conditioned upon my timely production and completion of documents required to verify my eligibility for employment in the United States.

A photocopy of this signed Applicant's Certificate and Release shall have the same force and effect as an original.

I also understand that the issuance of this application does not indicate that there are any positions open and does not in any way obligate the University.

I understand that any employment offer (or continued employment if employed) will be contingent upon my complying with all requirements outlined in this "Applicant's Certificate and Release" and any other employment-related requirements of the University.

THIS EMPLOYMENT APPLICATION IS NOT A CONTRACT OF EMPLOYMENT. SHOULD I BE OFFERED EMPLOYMENT OR BECOME EMPLOYED BY THE UNIVERSITY, I UNDERSTAND THAT BOTH THE UNIVERSITY AND I MAY END THE EMPLOYMENT RELATIONSHIP AT ANY TIME WITH OR WITHOUT CAUSE, WITH OR WITHOUT NOTICE AND WITHOUT LIABILITY TO ME FOR WAGES, SALARY, OR OTHER COMPENSATION EXCEPT SUCH AS I MAY HAVE EARNED THROUGH THE DATE OF SUCH TERMINATION. THIS PROVISION CANNOT BE CHANGED EXCEPT IN A WRITTEN EMPLOYMENT AGREEMENT SIGNED BY ME AND AN AUTHORIZED UNIVERSITY REPRESENTATIVE.

requirements.	it this application with full knowledge of these
	Applicant's Name (Print)
Date	Signature of Applicant

nterviewed by:			
Remarks:			

WORK EXPERIENCE (ADDITIONAL SHEET)

Employer			Work Performed		
	Date En	nployed			
Address	From	То			
Telephone Number(s)					
Job Title					
		ate/Salary			
Supervisor	Starting	Final			
Reason for Leaving			May we contact?	Yes	No
Employer			Work Performed		
Employer	Date Fr	nployed	Work i chomica		
Address	From	То			
Telephone Number(s)					
Job Title					
	Hourly Ra	ate/Salary			
Supervisor	Starting	Final			
Reason for Leaving					
S			May we contact?	Yes	No
Employer			Work Performed		
Employer	Date En	nploved	Work Performed		
Employer Address	Date En From	nployed To	Work Performed		
Address			Work Performed		
			Work Performed		
Address			Work Performed		
Address Telephone Number(s) Job Title	From Hourly Ra	To ate/Salary	Work Performed		
Address Telephone Number(s)	From	То	Work Performed		
Address Telephone Number(s) Job Title	From Hourly Ra	To ate/Salary	Work Performed May we contact?	Yes	No
Address Telephone Number(s) Job Title Supervisor Reason for Leaving	From Hourly Ra	To ate/Salary	May we contact?	Yes	No
Address Telephone Number(s) Job Title Supervisor	Hourly Ra Starting	To ate/Salary Final		Yes	No
Address Telephone Number(s) Job Title Supervisor Reason for Leaving	Hourly Ra Starting	To ate/Salary	May we contact?	Yes	No
Address Telephone Number(s) Job Title Supervisor Reason for Leaving Employer	Hourly Ra Starting Date En	To ate/Salary Final nployed	May we contact?	Yes	No
Address Telephone Number(s) Job Title Supervisor Reason for Leaving Employer Address	Hourly Ra Starting Date En	ate/Salary Final nployed To	May we contact?	Yes	No
Address Telephone Number(s) Job Title Supervisor Reason for Leaving Employer Address Telephone Number(s) Job Title	Hourly Ra Starting Date En From Hourly Ra	ate/Salary Final nployed To	May we contact?	Yes	No
Address Telephone Number(s) Job Title Supervisor Reason for Leaving Employer Address Telephone Number(s)	Hourly Ra Starting Date En	ate/Salary Final nployed To	May we contact?	Yes	No