**CLAFLIN UNIVERSITY** 



Office of Academic Affairs 400 Magnolia Street Orangeburg, South Carolina 29115 803-535-5000, 800-922-1276 www.claflin.edu

# **PROFESSIONAL APPLICATION FORM**

Claflin University is an Equal Opportunity Employer

I UNDERSTAND CLAFLIN UNIVERISTY IS AN AT-WILL EMPLOYER AND NOTHING COMMUNICATED EITHER VERBALLY OR IN WRITING DURING THE APPLICATION OR INTERVIEW PROCESS CREATES OR BINDS THE UNIVERSITY TO ANY CONTRACTURAL RIGHTS UNDER STATE LAW. NO SUPERVISOR, MEMBER OF MANAGEMENT, OR EMPLOYEE OF THE UNIVERSITY, EXCEPT FOR THE PRESIDENT, HAS AUTHORITY TO BIND CLAFLIN UNIVERSITY TO ANY EMPLOYMENT CONTRACT FOR ANY SPECIFIED PERIOD OF TIME EITHER VERBALLY OR IN WRITING. I UNDERSTAND IF HIRED I CAN TERMINATE MY EMPLOYMENT AT WILL, AT ANY TIME WITH OR WITHOUT ANY NOTICE AND CLAFLIN UNIVERSITY HAS THE SAME RIGHT TO TERMINATE MY EMPLOYMENT AT WILL, AT ANY TIME, WITH OR WITHOUT ANY NOTICE.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

\*Please attach your resume and transcripts (if applicable) to this Application

Date of Application: \_\_\_\_\_

Position Title: \_\_\_\_\_

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Claflin University does not discriminate on the basis of race, color, creed, religion, sex, age, national origin, disability, veteran status, sexual orientation, or any legally protected status.

#### Please check all applicable options:

Full-time:	Part-time:	Temporary:
Date available:		
PH	ERSONAL INFORMATION	<u>N</u>
Name:		
Phone:	Alternate Phone:	
(Please include area code)	(Ple	ease include area code)

Email address:

# **EDUCATIONAL BACKGROUND**

Name and Address	Years Attended	Graduation Date	Degree
	N/A	N/A	N/A
	Name and Address	Name and Address Attended	Name and Address Attended Date

Undergraduate Major:	Undergraduate Minor:	
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Graduate Major: \_\_\_\_\_ Graduate Minor: \_\_\_\_\_

# **TEACHING EXPERIENCE**

Name/Address of Institutions (most recent one first)Position/TitleDates
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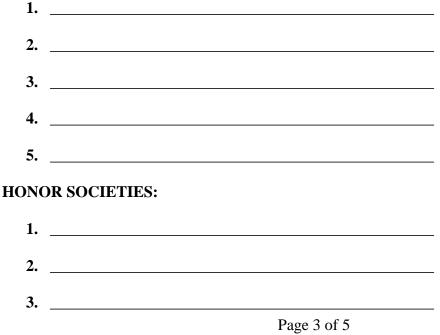
Claflin University does not discriminate on the basis of race, color, creed, religion, sex, age, national origin, disability, veteran status, sexual orientation, or any legally protected status.

List in order of preference three disciplines you are qualified to teach:

1.	
2.	
3.	

### **PROFESSIONAL AFFILIATIONS AND LEARNED SOCIETIES:**

You need not disclose membership in professional organizations that may reveal information regarding race, color, creed, sex, religion, national origin, ancestry, age, disability, marital status, veteran status, or any other protected status.



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4. \_\_\_\_\_

#### SELECT PUBLICATIONS (journal articles, monographs, books, technical papers, etc.):

Title	Publisher	Date

Title of Master's Thesis:

Title of Doctoral Dissertation:

What is your current salary? \_\_\_\_\_

Are you under contract for the next academic year? Yes\_\_\_\_ No\_\_\_\_

### **REFERENCES:**

Please list the names and addresses (including email) of references relative to your aptitude, professionalism, teaching success, and character.

Name:	Phone:
Address:	
Email:	
Name:	
	Page 4 of 5 s of race, color, creed, religion, sex, age, national origin, disability, veteran entation, or any legally protected status.

Address:	
Email:	
Name:	Phone:
Address:	
Email:	
Name:	Phone:
Address:	
Email:	
Name:	Phone:
Address:	
Email:	
Pursuant to University Policy No. 200.15: Nepotism, the U supervision of an employee by a member of his/her immed <b>Do you have any relatives that work for Claflin?</b>	liate family.
If yes, please provide name, department, and rel	

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