

Claflin University



400 Magnolia Street
Orangeburg, South Carolina, 29115
(803) 535-5635

Application for Employment

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: _____

Please check all applicable options:

Full-time: _____

Part-time: _____

Temporary: _____

Date available: _____

PERSONAL INFORMATION

Name: _____

Phone: _____
(Please include area code)

Alternate Phone: _____
(Please include area code)

Email address: _____

To aid in our verification, list any other names used while employed:

Have you worked for Claflin previously? Yes _____ No _____

If yes, please provide the department: _____

*Relatives working for Claflin? Yes _____ No _____

If yes, please provide name, department, and relationship:

**Pursuant to University Policy No. 200.15: Nepotism, the University does not permit the supervision of an employee by a member of his/her immediate family.*

How did you learn of this position?

___Newspaper ___Personal Referral ___In House Posting ___Claflin Employee

___Internet ___Other

Please specify source: _____

EDUCATIONAL BACKGROUND

Type of School	Name and Address	Years Attended	Graduated (Write "Yes" or "No")	Major
High School		----N/A----		-----N/A-----
College				
Graduate				
Post Graduate				
Business or Trade				
Other				

HONORS, CIVIC/BUSINESS ACTIVITIES, & SKILLS:

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.

Honors:

Activities:

Skills: List any skills, training, special license, or other qualifications that you feel are applicable to the position for which you are applying (i.e. word processing or computer-related skills, typing, Microsoft PowerPoint, dictation, etc.).

EMPLOYMENT HISTORY

Including U.S. Military Service

Please mark "N/A" beside the "Reason for Leaving" question if employer was U.S. Military.

Employer	Telephone with area Code	
Address	Salary	
Job Title And Duties	Employed (month and year) FROM	TO
Name of Supervisor	Reason for leaving:	
May we contact: Yes _____ No _____		

Employer	Telephone with area Code	
Address	Salary	
Job Title And Duties	Employed (month and year) FROM	TO
Name of Supervisor	Reason for leaving:	
May we contact: Yes _____ No _____		

Employer	Telephone with area Code	
Address	Salary	
Job Title And Duties	Employed (month and year) FROM TO	
Name of Supervisor	Reason for leaving:	
May we contact: Yes _____ No _____		

If necessary, please attach a supplemental page for listing additional employment history.

DISCLOSURE STATEMENT

1. Have you ever been dismissed from employment for cause?

Yes _____ No _____

If the answer is yes to either question, please give appropriate details.

PERSONAL REFERENCES

Name: _____ Phone: _____

Address:

Title/Position: _____

Name: _____ Phone: _____

Address:

Title/Position: _____

Name: _____ Phone: _____

Address: _____

Title/Position: _____

Name: _____ Phone: _____

Address: _____

Title/Position: _____

PLEASE READ CAREFULLY
APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge.

I understand that if employed, falsified statements on this application shall be considered sufficient cause for dismissal. All the information you give will be considered in reviewing your application and is subject to investigation.

Signature of Applicant: _____ Date: _____

APPLICANT, PLEASE DO NOT WRITE BELOW THIS LINE

INTERVIEW: Yes____ No____

DATE: _____ TIME: _____

RESULT OF INTERVIEW:

ACCEPTABLE FOR EMPLOYMENT? YES _____ NO _____

POSITION: _____

STARTING DATE: _____

STARTING RATE: _____

INTERVIEWED BY:

1. _____
2. _____
3. _____
4. _____