

## Human Resources Department

Application for Administrative An Affirmative Action, Equal Opportunity, Title							
Return Application to the Human Resorting Parkway, San Bernardino, CA Sierra Hall, Room 110 ~ (909) 537-5138	FOR OFFICE USE ONLY						
Date:							
Position Applying For:							
Department:							
General Information (Please	Туре	or Print	)				
Name: Last, First, Middle Initial		Home Telephone (Inc. Area Code)					
Address: Number, Street, Apartment/Space Number		Cell Telephone (Inc. Area Code)					
City, State, Zip Code		Work Telephone (Inc. Area Code)					
E-mail Address		May we contact you at work? Yes ☐ No ☐					
Can you submit proof of age at time of employment? Yes ☐ No ☐		ter employment, submit verific o work in the United State? Yo	Have you ever worked under another name? Yes No Is ges, please state name(s) to facilitate background check.				
If selected for employment, are you willing to be fingerprint Yes $\hfill \square$ No $\hfill \square$		or employment, are you willing amination? Yes \( \square\) No \( \square\)					
If selected for employment at CSUSB, how soon could you be available for work?	oe .	Information	vish to have a copy of any public record background check in accordance with tion Practices Act, Civil Code § 1798, et seq.? Yes ☐ No ☐ vw.ftc.gov/os/statutes/fcrajump.htm				
Do you have any relatives who are employees of California State University San Bernardino? Yes \( \subseteq \text{No } \subseteq \)					nt		
Are you currently enrolled as a student at California State University, San Bernardino? Yes No No					B? If so, when?		
Clerical / Secretarial Application only:  Typing Speed: CWPM  Short Speed: CWPM  Other Skills					s:		
Have you ever been dismissed from employment?  Yes \( \subseteq \text{No } \subseteq \)							
Have you ever been convicted of a felony? Yes No A conviction will not necessarily disqualify you from employ		es, describe.					
If you served in the U.S. Armed Forces, summarize experien	nce rele	evant to the po	osition for which you are apply	ing.			
Current licenses or certificates held (Specify kind and expir	For those positions, which rec Driver's License? Yes \( \square\) No	itions, which require driving, do you have a valid California nse? Yes ☐ No ☐					
	ration date.						
			CDL #:	Ex	piration Date:		

Education															
High School Education															
Name and Address of High School Attended				Major Course of Study					Did You Graduate? Yes ☐ No ☐						
College or University Educ	ation														
Name and Address of Institution			es		Units o	f Credit		Pleas			,	Major			alization
Name and Address of Institution	I	rom	To		Sem.	Qtr.		Degrees Earned		,			Within Major		
				-				Associat	te						
								Bachelo	rs						
								Masters	:						
								Doctora	te						
Special Training – Business	s, Tec	hnic							Co	urse	s, C	ertif	ica		
Name and Address of Institution or Organiz	zation	Dates From To		То	Hours per Week			Total Weeks		Subject Cover		red		Units of Sem.	Qtr.
												, com	- Vari		
	Dloose	identi	fy on	v ekil	l kno	wlodgo		r ability	rol	otod t	o this	nositio	ın ı	which w	ould assist
<b>Additional Qualifications</b>						olication			161	aleu t	uns	positio	, iii,	willen we	outu assist

Employment Volunteer Experience Considered	RESUMES MAY BE INCLUDED, BUT THIS EMPLOYMENT PORTION OF THE APPLICATION MUST BE FILLED IN COMPLETELY. List the last ten (10) years of your work history. Begin with your present job and list in reverse order. Include self-employment in excess of one month as a separate period. List each promotion as a separate job. Attach additional sheets as necessary.								
<b>,</b>	Include Military or volunteer experience. MAY WE CONTACT YOUR PRESENT EMPLOYER? Yes No								
Dates of Employment (Current)	Name of Employer or Company Telephone # (Inc. Area Code								
From: Mo. / Yr.	Address, City, State, Zip								
To:	Supervisor's Name and Job Title  Your Job Title								
Hours per week Last Salary	Describe Your Duties								
Per	Reason for Leaving								
Dates of Employment (Previous)	Name of Employer or Company Telephone # (Inc. Area Code)								
From: Mo. / Yr.	Address, City, State, Zip								
To:	Supervisor's Name and Job Title	Your Job Title							
Hours per week	Describe Your Duties								
Last Salary	Reason for Leaving								
Per Dates of Employment	Name of Employer or Company	Telephone # (Inc. Area Code)							
(Previous) From:	Address, City, State, Zip								
Mo. / Yr.  To:	Supervisor's Name and Job Title  Your Job Title								
Hours per week  Last Salary	Describe Your Duties								
Per	Reason for Leaving								
Dates of Employment (Previous)	Name of Employer or Company Telephone # (Inc. Area								
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Hours per week Last	Describe Your Duties								
SalaryPer	Reason for Leaving								
Dates of Employment (Previous)	Name of Employer or Company  Telephone # (Inc. Area C								
From: Mo. / Yr.	Address, City, State, Zip								
To:	Supervisor's Name and Job Title	Your Job Title							
Hours per week Last Salary	Describe Your Duties								
Per	Reason for Leaving								

References List a minimu	um of FOUR people not related to you who can att	test to your professional abilities and expertise.							
Name	Occupation/Title	Telephone Number							
Address, City, State, Zip									
Name	Occupation/Title	Telephone Number							
Address, City, State, Zip									
Name	Occupation/Title	Telephone Number							
Address, City, State, Zip									
Name	Occupation/Title	Telephone Number							
Address, City, State, Zip	Address, City, State, Zip								
The Immigration Reform and Control Act of 1986, Public Law 99-603, required that employers obtain documentation from every new employee, which confirms identity and authorizes that individual to accept employment in this country. This requirement applies to both United States citizens and aliens. Can you provide the necessary documentation at the start of employment? Yes No If you are employed by California State University, San Bernardino, you will be required to sign the State Employee's Oath of Allegiance swearing (or affirming) your support of the Constitution of the United States and the State of California (non-citizens are exempted). Are you willing to sign such an oath? Yes No This information may be used only for the purpose of employment in accordance with the Information Act of 1977.  Thereby certify that the information contained in this application form is true, complete and correct to the best of my knowledge and agree to have any of the statements checked by the University unless I have indicated to the contrary. I wish to be considered for employment with the California State University. I hereby authorize the CSU and its agents to investigate and verify all statements contained in my employment application, to obtain information concerning my qualifications as a prospective employee, and to conduct the appropriate background check as necessary. In connection with this investigation, I authorize the CSU to contact each of my former employers and the references listed herein. I also authorize each of my former employers and the references listed herein to give the CSU any and all information concerning my previous employment and any pertinent information they may have regarding my work performance, whether such information is favorable to me. I hereby fully release all such persons and entities from all liability with respect to furnishing such information to the CSU, and waive any claims I may have against them with respect to furnishing such information to investigate or to make a decision with									
Applicant's Signature Date									
California State University, San Bernardino <u>Campus Safety Report</u> Double click on "Campus Safety Report" on the CSUSB main home page Or view at <a href="http://police.csusb.edu/safetyreport.html">http://police.csusb.edu/safetyreport.html</a>									

## CALIFORNIA STATE UNIVERSITY, SAN BERNARDINO

## AFFIRMATIVE ACTION SURVEY FORM CONFIDENTIAL – VOLUNTARY

## Dear Applicant,

California State University, San Bernardino is an Affirmative Action Employer and is required to maintain statistics on all applicants. This data is for statistical purposes only and has no bearing on applicant selection. This form shall be retained in the Human Resources Department, separately from the application for employment, and will not be made available to the hiring department. While your reply will be most helpful to us in carrying out our administrative responsibilities, return of this form is entirely voluntary. Thank you for your cooperation!

	: on applied for tment:	:	Job Code:								
SEX:	☐ Male	☐ Fema	ıle								
ETHN	1 Blac 2 Asia Islan 3 Othe 4 Hisp 5 Whi 6 Paci 7 Nati Ame	k – Person of lander or Filipino er – Non-White anic – Person a te ( <i>Not Hispan</i> fic Islander – F ve American –	Black African description  Japanese, Chinese  Description  Black African description  Black African description  Control  Black African description  Black A	cent. e, Korea o Rican iropean, n, Samo can Indi	n, Vietnamese, Asia , Cuban, South or Ce North African or Mi an, Guamanian, Poly	n Indian, Thai or si ntral American or o ddle Eastern descer vnesian, Fiji or Tahi					
	RAN STATUS Veteran? Vietnam Vet	eran? [	☐ Yes ☐ No ☐ Yes ☐ No ability that wou	ıld qua	<b>Disabled V</b> lify you as a disa	'eteran? ☐ Yes [ bled person? ☐					
			CSUSB? Tyes	□ No	•						
REFE	CSUSB J Job Hotli Referral Employe	ob Vacancy L ne	ist		Newspaper Ad Internet: HRWebsite Careerbuilder Other:	Which Source Publication?  Monster.  HERC					