

Employer		Type of Business:		Full time <input type="checkbox"/>
Mailing Address:				Part Time <input type="checkbox"/>
City and State:				Seasonal <input type="checkbox"/>
Starting Date:	Leaving Date:	Starting Base Salary:	Ending Base Salary:	Position Title:
Immediate Supervisor:				
Briefly describe your duties and responsibilities:				
Reason for Leaving:				

Special Skills/Qualifications - List all special skills you possess and machines or office equipment you can use, including proficiency in software/computer programs: _____

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY AND INDICATE YOUR UNDERSTANDING AND ACCEPTANCE BY SIGNING IN THE SPACE PROVIDED

1. I certify that all the information provided by me in connection with my application, whether on this document or not, is true and complete, and I understand that any misstatement, falsification, or omission of information shall be grounds for refusal to hire, or if hired, termination.
2. I understand that as a condition of employment, I will be required to provide legal proof of authorization to work in the U.S.
3. I understand that some state agencies will check with the Texas Department of Public Safety and/or the Federal Bureau of Investigation for any criminal history in accordance with applicable statutes.
4. I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, or any other information they might have, personal or otherwise, with regard to any of the subjects covered by this application, and I release all such parties from all liability from any damages which may result from furnishing such information to you. I authorize Angelo State University to review any academic records and/or personnel records which may be on file and the University and upon request, agree to furnish of other additional copies of other additional records to support my application.

YOU MAY CONTACT:

Present Employer Yes No
Former Employers Yes No

Applicant's Signature

Date

List the times from Monday-Friday you would be available to work. There are times, such as during special events, that additional hours would be required. **Hours enrolled next Fall** _____ **Hours enrolled next spring** _____.