

# EMPLOYMENT APPLICATION



FERRIS STATE UNIVERSITY



Kendall College of Art and Design

Ferris State University is an EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER. The information requested is needed to help the University assess your employment interests and qualifications. Please answer all questions completely, even if you attach a resume. In addition to the Employment Application, additional application materials may be required. Specific application instructions and required materials are listed on each job posting. Faculty, administrative and administrative support positions require a new application for each position. Applications for other positions are kept active for six months. A new application must be completed if older than six months. **The University may refuse employment consideration if this form is not filled out completely and accurately or if employment application materials are outdated.**

PLEASE PRINT IN BLACK INK OR TYPE

**Position you are applying for:** \_\_\_\_\_ **Current Date:** \_\_\_\_\_

## PERSONAL INFORMATION

Full Name \_\_\_\_\_  
First Middle Last

Address \_\_\_\_\_  
Street City State Zip Code

E-mail address \_\_\_\_\_ ( \_\_\_\_\_ ) \_\_\_\_\_ ( \_\_\_\_\_ ) \_\_\_\_\_  
Home Telephone Number Alternate Number

Are you at least 18 years of age? Yes  No  (If no, a work permit must be presented before employment begins)

Are you authorized to work in the United States? Yes  No  Date available to start work \_\_\_\_\_

Have you ever been employed by FSU? Yes  No  If yes, list last position held and employment dates: \_\_\_\_\_

What employment conditions will you accept? (check all that apply)

- Full-time  Part-time  Temporary or On Call  Summer  Day  Evening  Night  Weekend

List all relatives now employed by the University: \_\_\_\_\_

How did you learn about employment opportunities at Ferris State University? (check all that apply)

- FSU Human Resources  Employee Referral  FSU Web Site  Other Web Site (please list) \_\_\_\_\_  
 Newspaper (please list) \_\_\_\_\_  Other Print Publication (please list) \_\_\_\_\_  Other (please list) \_\_\_\_\_

### Criminal Record Search

Ferris State University conducts a criminal record search on all new employees and may do the same for applicants considered for employment. Information obtained through such a search will be used in evaluating an employee's continuation of employment or a candidate's suitability for an offer of employment at FSU.\* The information you provide below will be compared to the criminal record search results to determine the accuracy of your answers.

**Have you ever been convicted of a felony or misdemeanor?** Yes  No

If yes, list date, charge, place, and action taken for **ALL** felony and misdemeanor convictions:

**Are any felony charges currently pending against you?** Yes  No

\*A yes response above does not necessarily mean that you cannot be employed. A criminal conviction will be evaluated on a number of factors including, but not limited to, relation to the position for which you have applied, nature of the crime, and the date of occurrence. **However, falsely answering the questions above may result in termination of employment or your application being removed from further consideration.**

## EDUCATION

School	Name & Location	Years Completed	Was a degree, diploma, or certificate awarded?	If yes, list degree, diploma, or certificate you were awarded	Major	Minor
Last High School	Name: Location:	1 2 3 4	Yes / No			
Business/Technical/Trade/Military School	Name: Location:	1 2 3 4	Yes / No			
College/University	Name: Location:	1 2 3 4	Yes / No			
College/University	Name: Location:	1 2 3 4	Yes / No			
Graduate School	Name: Location:	1 2 3 4	Yes / No			
Graduate School	Name: Location:	1 2 3 4	Yes / No			

## LICENSES AND/OR CERTIFICATES

### Type of License/Certificate

### Issuing State or Agency

### Number

#### Expiration Date

Driver's     CDL-class: \_\_\_\_\_    \_\_\_\_\_    \_\_\_\_\_  
 Professional    \_\_\_\_\_    \_\_\_\_\_    \_\_\_\_\_  
 Technical    \_\_\_\_\_    \_\_\_\_\_    \_\_\_\_\_

## KNOWLEDGE, SKILLS, AND ABILITIES

Check any of the following for which you have been trained, are licensed or have experience.

<input type="checkbox"/> General Building Maintenance	<input type="checkbox"/> Typing _____ WPM	<input type="checkbox"/> Fax machines	<input type="checkbox"/> PC Software (list programs)
<input type="checkbox"/> Institutional Cleaning	<input type="checkbox"/> Data Entry	<input type="checkbox"/> Copiers	_____
<input type="checkbox"/> Grounds Work	<input type="checkbox"/> Filing	<input type="checkbox"/> Electronic mail	_____
<input type="checkbox"/> Dining/Food Service	<input type="checkbox"/> Working with math figures	<input type="checkbox"/> Internet	<input type="checkbox"/> Other computer/tech. exp
<input type="checkbox"/> Teaching	<input type="checkbox"/> Multi-line telephone/switchboard	<input type="checkbox"/> Personal computers	_____
<input type="checkbox"/> Bookkeeping/Acctg.(exp./edu.)	<input type="checkbox"/> Calculator/adding machine	<input type="checkbox"/> Mainframe comp. systems	_____

List any other knowledge, skills, and abilities, you possess that may qualify you for the position for which you are applying:

\_\_\_\_\_

\_\_\_\_\_

List any vocational certifications, professional certifications, special training, seminars or awards you have received:

\_\_\_\_\_

\_\_\_\_\_

## PROFESSIONAL REFERENCES

Please list three individuals having knowledge of your related work experience/academic background that we may contact. Do not list relatives.

1. Name \_\_\_\_\_ Position \_\_\_\_\_ Years Known \_\_\_\_\_

Address \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
Street City State Zip Code Telephone Number

How does this person know you? \_\_\_\_\_

2. Name \_\_\_\_\_ Position \_\_\_\_\_ Years Known \_\_\_\_\_

Address \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
Street City State Zip Code Telephone Number

How does this person know you? \_\_\_\_\_

3. Name \_\_\_\_\_ Position \_\_\_\_\_ Years Known \_\_\_\_\_

Address \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
Street City State Zip Code Telephone Number

How does this person know you? \_\_\_\_\_

## EXPERIENCE

Starting with your present or most recent employer, please list your work experience, including any U.S. or other military experience. Include all employment whether full-time, part-time, summer or temporary. Attach a separate sheet, if necessary. This section must be fully completed. Listing "See Resume" or other similar language is NOT acceptable and may eliminate your application from further consideration.

Employer Name \_\_\_\_\_ Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip Code

Position Title \_\_\_\_\_  Full-time  Part-time Ending Salary/Pay Rate \_\_\_\_\_

Description of Duties \_\_\_\_\_

Reason for Leaving \_\_\_\_\_ Supervisor/Telephone \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_

May we contact this supervisor for information?  Yes  No If no, why? \_\_\_\_\_

Employer Name \_\_\_\_\_ Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip Code

Position Title \_\_\_\_\_  Full-time  Part-time Ending Salary/Pay Rate \_\_\_\_\_

Description of Duties \_\_\_\_\_

Reason for Leaving \_\_\_\_\_ Supervisor/Telephone \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_

May we contact this supervisor for information?  Yes  No If no, why? \_\_\_\_\_

Employer Name \_\_\_\_\_ Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip Code

Position Title \_\_\_\_\_  Full-time  Part-time Ending Salary/Pay Rate \_\_\_\_\_

Description of Duties \_\_\_\_\_

Reason for Leaving \_\_\_\_\_ Supervisor/Telephone \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_

May we contact this supervisor for information?  Yes  No If no, why? \_\_\_\_\_

Employer Name \_\_\_\_\_ Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip Code

Position Title \_\_\_\_\_  Full-time  Part-time Ending Salary/Pay Rate \_\_\_\_\_

Description of Duties \_\_\_\_\_

Reason for Leaving \_\_\_\_\_ Supervisor/Telephone \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_

May we contact this supervisor for information?  Yes  No If no, why? \_\_\_\_\_

## APPLICANT'S CERTIFICATION AND AGREEMENT

### PLEASE READ CAREFULLY:

**1. Certification of Truthfulness:** I hereby affirm that the information provided on this application (and accompanying application materials, if any) is true and complete to the best of my knowledge. I understand that any false information or significant omission may disqualify me from further consideration for employment and may result in discipline or dismissal if discovered after employment.

**2. Authorization to Work:** I understand that at the time of hire, I will be required to produce employment eligibility documents in compliance with the Immigration Reform and Control Act of 1986. (Employment Eligibility Verification Form I-9.) As a consequence, I understand that any offer of employment would be contingent on my ability to produce the required documents.

**3. Criminal Record Search/Driver's License Verification:** I have read and understand the criminal record search information on Page 1 of this application and understand that employment or continued employment at the University will be contingent upon a review of my criminal conviction record. I authorize the University to investigate, request, and obtain a report to determine the accuracy of my answers on Page 1 as to prior criminal convictions, if any. I also understand that if needed for my job duties, the University may periodically confirm that I possess a valid driver's license.

**4. Physical Exam and Release of Medical Information:** I agree to take a physical exam following a job offer conditioned on passing a physical exam. I authorize every medical doctor, physician or other health-care provider to provide any and all information, including but not limited to, all medical reports, laboratory reports, X-rays or clinical abstracts relating to my previous health history or employment in connection with any examination, consultation, test or evaluation. I hereby release every medical doctor, health-care worker and every other person, firm, officer, corporation, association, organization or institution which shall comply with the authorization or request made in this respect from any and all liability. I understand that this release will not be sent to my physician or other health care provider until a job offer has been made.

**5. Drug and Alcohol Testing:** I agree to provide Ferris State University with appropriate specimens to determine or exclude the presence of alcohol, drugs or other substances. I understand that a decision concerning my employment will be made as a result of these tests.

**6. Limitations of Claims:** I agree, that any lawsuit against Ferris State University and/or its agents, asserting claim(s) arising under any State or Federal laws (except claims based on the Fair Labor Standards Act and/or the Family and Medical Leave Act), including but not limited to all civil rights laws, pertaining to my employment or the termination of my employment, must be filed within the following time limits or be forever barred: (a) all claims requiring a Notice of Right to Sue from the EEOC must be filed in court within the 90 day period required by law following issuance of that Notice; and (b) all other causes of action and claims not requiring a Right to Sue Notice (regardless of whether they may be later joined with a claim for which a Right to Sue notice is required) must be asserted in a lawsuit filed within (i) 180 days of the event(s) giving rise to the claim, or (ii) the time limit specified by statute, whichever is shorter. I waive any statute(s) of limitations providing longer periods to assert claims encompassed by subparagraph (b).

**7. Disclosures:** I agree that the contents of my offices, work spaces, desks, computer and computer generated data, any Ferris State University property, I may be using, and any of my own property I bring to Ferris State University premises may be inspected by Ferris State University at any time it determines there is reasonable cause to do so, and I waive and promise not to make any claims against Ferris State University (or its employees or agents) relating to such inspection. I agree that, except as directed otherwise in writing by Ferris State University, I will not disclose to anyone or use for my own purposes, any of Ferris State University's confidential or proprietary information, either during or after my employment. I understand and agree that client names and information, financial data, computer information and processes are confidential and proprietary information and I will not make written or other copies or notes regarding these matters except as necessary to perform my job. I agree that if my employment ends, I will deliver to Ferris State University all material of any kind that I have relating to its business, including any such copies or notes.

**8. Need for Accommodation:** In the event I require an accommodation to enable me to perform the essential functions of the job, I understand I must request in writing an accommodation from Ferris State University within 182 days of when I know or should have known I needed an accommodation. Failure to do so will bar me from alleging that the University has not accommodated me as required by law. This requirement does not alter any rights afforded by Title I of the ADA of 1990 as amended.

**9. Authorization for Employment/Educational Information:** I authorize a thorough investigation of my past employment, agree to cooperate in such investigation, and release to Ferris State University all information requested regarding my work record from my previous employer(s) and/or my academic records (transcripts). I understand this information will be used only to evaluate my qualifications for work. I agree that this will not be necessary for each employer/institution that provides this information to notify me when the requested information is released.

I have read and understand items one (1) through nine (9) above, and acknowledge that with my signature below.

I agree that if any of the above commitments by me is ever found to be legally unenforceable as written, the particular agreement concerned shall be limited to allow its enforcement as far as legally permissible.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Applicant's Name (please print) \_\_\_\_\_

Return to: Ferris State University  
Human Resources  
420 Oak Street, PRK-150  
Big Rapids, MI 49307-2020  
(231)591-2150

The Ferris State University Campus Crime Awareness brochure is available upon request at FSU Human Resources.