



APPLICATION FOR EMPLOYMENT

Personal Information

Last name First name Middle initial Date

Street address E-mail address

City State Zip Telephone number

Position Desired: _____

How did you learn of this position?

Salary expected (per month or hour – required) Date available to begin work

If hired, can you provide proof of identity and eligibility to work in the U.S.? Yes No

Have you ever been convicted of a crime? Yes No (This will not necessarily disqualify you for a position.)

If yes, please explain: _____

Education

High School _____

College or Post High School Course of Study Degree

Employment Experience (List your most recent employer first)

1. _____
Dates (Month/Year to Month/Year) Position

Organization Supervisor

Reason for Leaving Contact Phone Number



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2. _____
Dates (Month/Year to Month/Year)

Position

Organization

Supervisor

Reason for Leaving

Contact Phone Number

3. _____
Dates (Month/Year to Month/Year)

Position

Organization

Supervisor

Reason for Leaving

Contact Phone Number

Other training relevant to your job interest

References (Do not list relatives or close friends. Please list three references.)

1. **Name:** _____

How long has this person known you?

Address

Phone Number

E-mail address

2. **Name:** _____

How long has this person known you?

Address

Phone Number

E-mail address



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AS AN APPLICANT FOR EMPLOYMENT WITH BLUFFTON UNIVERSITY, I UNDERSTAND THE FOLLOWING:

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize Bluffton University to verify their accuracy and to obtain reference information on my work performance. I hereby release Bluffton University from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information. I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered sufficient basis for dismissal.

I, the undersigned, hereby authorize and request any present or former employer, educational institution, law enforcement agency, department of motor vehicles, financial institution, or other persons having personal knowledge about me to furnish Bluffton University and/or its agents, with any and all information in their possession regarding me, in connection with an application for or retention of employment. Further, I hereby release from liability and hold harmless all persons and corporations supplying this information to Bluffton University and/or its agents. A photocopy of this authorization is as effective as the original.

I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment of the employer. However, I further understand that the policies, rules, regulations of employment or anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or the employer may terminate my employment at any time with or without notice or cause.

Initial if Bluffton should not contact current/former employers. _____ Please do not contact current/former employers

Signature _____ Date _____

Employment decisions are based on merit and university needs, and not on race, color, national origin, ancestry, sex, age, disability, marital status, sexual orientation, gender identity or any other status protected by law. As a religious institution, Bluffton University expressly reserves its rights to appoint faculty and staff who share a commitment to the Christian faith which is consistent with the Mennonite/Anabaptist beliefs of the university's founding and supporting church.