

**Application for Employment**

East Georgia College is an Equal Opportunity Educational Institution and EEO/Affirmative Action Employer committed to excellence through diversity. Employment offers are made on the basis of qualifications, and without regard to race, sex, religion, national or ethnic origin, disability, age, veteran status, or sexual orientation.

**PLEASE TYPE OR PRINT.** Complete both sides of the application. You may attach a resume, but you must still complete all questions or your application will be deemed incomplete and may not be considered. Please fill out each box (don't just indicate "See Resume.")

Position Applying For: TITLE:	Name (LAST, first, middle)		Other names under which you have attended school or been employed:
Street Address	City, State & ZIP		
Email Address	Home Phone	Work Phone	Other Phone

Are you eligible to work in the United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you 18 years of age or older?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If NO, can you provide a work permit?
Are you currently employed at East Georgia College or any other University System of Georgia institution?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, what is your current job title & department?
Have you ever been employed by East Georgia College or any other University System of Georgia Institution?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, Institution name, dates of employment & reason for leaving:
Are you related to any current East Georgia College employee?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, their name & their relationship to you?
If required for position, do you have a valid driver's license?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, State of issuance, license #, and expiration date:
How did you learn about this employment opportunity at East Georgia College? Check all that apply: <input type="checkbox"/> Newspaper Ad		
<input type="checkbox"/> Job Bulletin (Posting) /Walk-in <input type="checkbox"/> Website <input type="checkbox"/> GA Dept. of Labor <input type="checkbox"/> Chronicle of Higher Education		
<input type="checkbox"/> Referral by a EGC employee <input type="checkbox"/> University System of Georgia Applicant Clearinghouse <input type="checkbox"/> Other:		

**EDUCATION**

Name of School	City/State	Did you graduate?	If No, # of years left to graduate	Degree received	Major
High School		<input type="checkbox"/> Yes <input type="checkbox"/> No			
GED		<input type="checkbox"/> Yes <input type="checkbox"/> No			
Other School e.g., Vocational		<input type="checkbox"/> Yes <input type="checkbox"/> No			
College		<input type="checkbox"/> Yes <input type="checkbox"/> No			
College		<input type="checkbox"/> Yes <input type="checkbox"/> No			
College		<input type="checkbox"/> Yes <input type="checkbox"/> No			

Other credentials/ licenses/ professional affiliations, etc., which are relevant to the job(s) for which you are applying.

**SKILLS:** Please list technical skills, clerical skills, trade skills, etc., relevant to this position. Include relevant computer systems and software packages of which you have a working knowledge, and note your level of proficiency (basic, intermediate, expert)


**WORK EXPERIENCE**-Please detail your entire work history. Begin with your current or most recent employer. If you held multiple positions with the same organization, detail each position separately. Attach additional sheets if necessary. Omission of prior employment may be considered falsification of information. Please explain any gaps in employment. Include full-time military or volunteer commitments. PLEASE DO NOT complete this information with the notation "See Resume."

**PLEASE NOTE:** East Georgia College reserves the right to contact all current and former employers for reference information.

Dates Employed (most recent position) From: _____ / _____ to _____ / _____ mo      yr          mo      yr	<input type="checkbox"/> Full time <input type="checkbox"/> Part-time  If part-time, # hrs./wk:	Title:
Starting Salary:	Organization Name and Address:	
Final Salary:		
Supervisor's Name, Title and Phone #:	Other Reference Name, Title and Phone #:	Contact my current references: <input type="checkbox"/> At any time <input type="checkbox"/> Only if I am a finalist candidate
Primary duties:	Reason for Leaving	

Dates Employed From: _____ / _____ to _____ / _____ mo      yr          mo      yr	<input type="checkbox"/> Full time <input type="checkbox"/> Part-time  If part-time, # hrs./wk:	Title:
Starting Salary:	Organization Name and Address:	
Final Salary:		
Supervisor's Name, Title and Phone #:	Other Reference Name, Title and Phone #	Contact these references: <input type="checkbox"/> At any time <input type="checkbox"/> Only if I am a finalist candidate
Primary duties:	Reason for Leaving:	

Dates Employed From: _____ / _____ to _____ / _____ mo      yr          mo      yr	<input type="checkbox"/> Full time <input type="checkbox"/> Part-time  If part-time, # hrs./wk:	Title:
Starting Salary:	Organization Name and Address:	
Final Salary:		
Supervisor's Name, Title and Phone Number:	Other Reference Name, Title and Phone Number:	Contact these references: <input type="checkbox"/> At any time <input type="checkbox"/> Only if I am a finalist candidate
Primary duties:	Reason for Leaving	

**PLEASE READ CAREFULLY AND SIGN THAT YOU UNDERSTAND AND ACCEPT THIS INFORMATION.**

I certify that the information on this application and its supporting documents is accurate and complete. I understand and agree that failure to fully complete the form, or misrepresentation or omission of facts, represents grounds for elimination from consideration for employment, or termination after employment if discovered at a later date. I authorize East Georgia College to investigate, without liability, all statements contained in this application and supporting materials. I authorize references and former employers, without liability, to make full response to any inquiries in connection with this application for employment. If requested, I agree to submit to a criminal and credit background investigation upon conditional offer of employment. I understand that this document is NOT an offer of employment, and that an offer of employment, if tendered, does NOT constitute a contract for continued guaranteed employment. I understand that staff employees of East Georgia College serve at-will, and the employment relationship may be terminated at any time by either party, or any or no reason, other than a reason prohibited by law. If employed, I will be required to furnish proof of eligibility to work in the United States, to file a State security questionnaire and State loyalty oath, and to comply with college and departmental regulations. I understand that if employed on a temporary basis, I would be paid for hours worked only, and would be ineligible for benefits including paid time off. If employed on a regular, benefits-eligible basis, I understand that I would be required to make mandatory contributions to the Teachers Retirement System or to an optional retirement program, if applicable. I understand that any benefits I receive may be subject to change or discontinuation at any time without prior notice. I understand that the first SIX MONTHS of regular employment represent a provisional period, during which I would not be eligible to apply for transfer or promotion and during which I may be terminated without right of appeal. East Georgia College is a tobacco free campus. East Georgia College does not allow the use of any tobacco products in the buildings or on the grounds of the institution. By signing below, applicant hereby acknowledges notification of this tobacco free policy.

APPLICANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_



### AFFIRMATIVE ACTION INFORMATION FORM

You have applied for a position at East Georgia College. The requested information listed below is needed to satisfy Affirmative Action reporting requirements. East Georgia College is asking you to help us as a VOLUNTARY action. This information will not be used as part of the employment decision. We thank you for your cooperation. A self addressed, postage paid envelope is enclosed for you convenience.

#### **INFORMATION ON YOURSELF**

**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Sex:** Male  Female

**What is your ethnicity?** Hispanic or Latino  Not Hispanic or Latino

**Select one or more races to indicate what you consider yourself to be:**

Asian  Black or African American  Hispanic  White

American Indian or Alaskan Native  Native Hawaiian or Other Pacific Islander

Multiracial

**If a United States Armed Forces Veteran are you a:**

Disabled Veteran  and/or Vietnam Era Veteran

*(Check both if appropriate)*

#### **INFORMATION ON THE VACANCY**

**Position** \_\_\_\_\_  
*(Name of Position)*

**How did you learn of this vacancy?**

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Please be advised that under Georgia's Open Records law the names of position candidates may be subject to public disclosure.

**Date form completed** \_\_\_\_\_

Please return the form to:

Tracy M. Woods  
Director of Human Resources  
East Georgia College  
131 College Circle  
Swainsboro, GA 30401

*East Georgia College is an Affirmative Action/Equal Opportunity Institution*