



1555 Newark Road, Zanesville, Ohio 43701  
 www.zanestate.edu • 740-588-1285

## Application Of Employment

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital status, sexual orientation, or any other legally protected status. We are an Equal Opportunity Employer.

**(Please Print or Type)**

|  |                           |
|--|---------------------------|
| Position(s) Applied For  | Annual Salary Expected \$ |
| How Did You Learn About Us? <input type="checkbox"/> Web <input type="checkbox"/> Walk-in<br><input type="checkbox"/> Advertisement <input type="checkbox"/> Friend <input type="checkbox"/> Other<br><input type="checkbox"/> Employment Agency <input type="checkbox"/> Relative |                           |

|                               |                     |                        |
|-------------------------------|---------------------|------------------------|
| Last Name                     | First Name          | Middle Name            |
| Address                       | Number              | Street                 |
|                               |                     | City                   |
|                               |                     | State                  |
|                               |                     | Zip Code               |
| Telephone Numbers(s)<br>Home: | Business (Optional) | Social Security Number |

If your are under 18 years of age, can you provide required proof of your eligibility to work?     Yes                                     No

Have you ever filed an application with us before?     Yes                                     No  
*If Yes, give date:* \_\_\_\_\_

Have you ever been employed with us before?     Yes                                     No  
*If Yes, give date:* \_\_\_\_\_

Are you currently employed?     Yes                                     No

May we contact your present employer and/or any other references you have listed?     Yes                                     No

Are you prevented from lawfully becoming employed in this country because of visa or immigration status?     Yes                                     No  
Proof of citizenship or immigration status will be required upon employment.

On what date would you be available for work? \_\_\_\_\_

Are you available to work (check all that apply):     Full Time     Part Time     Days     Evenings

Are you currently on layoff status and subject to recall?     Yes                                     No

**If Applying For A Teaching Position, Complete The Following Lines:**

Major Teaching Field(s) \_\_\_\_\_

Other Subjects Qualified To Teach \_\_\_\_\_

# Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

| Employer            |            | Dates Employed |    | Work Performed |
|---------------------|------------|----------------|----|----------------|
|                     |            | From           | To |                |
| Address             |            |                |    |                |
| Telephone Number(s) |            |                |    |                |
| Job Title           | Supervisor |                |    |                |
| Reason for Leaving  |            |                |    |                |
| Employer            |            | Dates Employed |    | Work Performed |
|                     |            | From           | To |                |
| Address             |            |                |    |                |
| Telephone Number(s) |            |                |    |                |
| Job Title           | Supervisor |                |    |                |
| Reason for Leaving  |            |                |    |                |
| Employer            |            | Dates Employed |    | Work Performed |
|                     |            | From           | To |                |
| Address             |            |                |    |                |
| Telephone Number(s) |            |                |    |                |
| Job Title           | Supervisor |                |    |                |
| Reason for Leaving  |            |                |    |                |
| Employer            |            | Dates Employed |    | Work Performed |
|                     |            | From           | To |                |
| Address             |            |                |    |                |
| Telephone Number(s) |            |                |    |                |
| Job Title           | Supervisor |                |    |                |
| Reason for Leaving  |            |                |    |                |

***If additional space is needed, please continue on a separate sheet of paper.***

| DO NOT CONTACT   |                     |
|--|---------------------|
| We may contact the employers listed above unless you indicate those you do not want us to contact. | Employer Name _____ |
|  | Reason _____        |
|  |                     |
|  |                     |
|  |                     |
|  |                     |
|  |                     |

**Education** Circle last year of formal education completed: 1 2 3 4 5 6 7 8 9 10 11 12 College 1 2 3 4 5 6 7 8 Other 1 2 3 4

| Name and Location of School                                   |  | From | To | Degree Received | Program or Major Course Work | Credits Completed After Degree (Quarter Hours) |
|---|--|------|----|-----------------|------------------------------|--|
| High School   |  |      |    |                 |                              |  |
|   |  |      |    |                 |                              |  |
| College, University, Business, Technical, or Military Schools |  |      |    |                 |                              |  |
|   |  |      |    |                 |                              |  |
|   |  |      |    |                 |                              |  |
|   |  |      |    |                 |                              |  |
|   |  |      |    |                 |                              |  |
| Graduate School   |  |      |    |                 |                              |  |
|   |  |      |    |                 |                              |  |
|   |  |      |    |                 |                              |  |
|   |  |      |    |                 |                              |  |

**Licensures, Certifications, and/or Other Educational/Professional Credentials**

| Type of License/Certificate | Issuing State or Agency | Number | Expiration Date |
|-----------------------------|-------------------------|--------|-----------------|
|                             |                         |        |                 |
|                             |                         |        |                 |
|                             |                         |        |                 |

**References (Present and/or Former Colleagues or Clients)**

- \_\_\_\_\_ (Name) \_\_\_\_\_ ( ) Phone # \_\_\_\_\_

\_\_\_\_\_ (Address)
- \_\_\_\_\_ (Name) \_\_\_\_\_ ( ) Phone # \_\_\_\_\_

\_\_\_\_\_ (Address)
- \_\_\_\_\_ (Name) \_\_\_\_\_ ( ) Phone # \_\_\_\_\_

\_\_\_\_\_ (Address)

## Additional Information

### Other Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

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List any other experiences, skills, or attributes which you feel would especially qualify you for work at Zane State College.

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What do you consider your chief accomplishments? \_\_\_\_\_

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What is your philosophy of technical education? \_\_\_\_\_

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Zane State College is an EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER. Consideration was given in the development of this form to your right to individual privacy and equal opportunity. The information of this form is needed to help the College assess your employment interest and qualifications and to enable us to contact you. The College may refuse employment consideration if this form is not filled out completely and accurately.

### **Certification and Statement of Understanding**

I certify that all of the information in this employment application is true and complete to the best of my knowledge. I understand that the College might investigate the information I have furnished and I realize that any misrepresentation or false information in this application can lead to withdrawal of any employment offer or termination after employment.

Signature \_\_\_\_\_ Date \_\_\_\_\_