

Allen University

Employment Application

PERSONAL DATA

Name _____ Date: _____

Present Address _____ City _____ State _____ Zip _____

Phone _____ Alternate Phone _____ E-Mail Address _____

Do you possess a valid driver's license: _____ Number and
 Yes No Class A B C D State _____ Expiration Date _____

Have you ever been convicted of a criminal offense? Yes No Please list charge(s) _____

EDUCATION

Post Secondary Degree? AA BA BS MA Ph.D. High School Diploma or GED? Yes No

Graduate _____ Course of Study _____ Did you graduate? Yes No

College _____ Course of Study _____ Did you graduate? Yes No

Other _____ Course of Study _____ Did you graduate? Yes No

WORK EXPERIENCE (List most recent work experience first)

Employer Name _____ Immediate Supervisor _____

Complete Address _____
Street / P.O. Box _____ City _____ State _____ Zip Code _____

Job Title _____ Salary _____ Phone _____

Job Description _____

Dates: From (mm/yy) _____ / _____ To (mm/yy) _____ / _____ Reason for leaving _____

WORK EXPERIENCE

Employer Name _____ Immediate Supervisor _____

Complete Address _____
Street / P.O. Box _____ City _____ State _____ Zip Code _____

Job Title _____ Salary _____ Phone _____

Job Description _____

Dates: From (mm/yy) _____ / _____ To (mm/yy) _____ / _____ Reason for leaving _____

WORK EXPERIENCE

Employer Name _____ Immediate Supervisor _____

Complete Address _____
Street / P.O. Box _____ City _____ State _____ Zip Code _____

Job Title _____ Salary _____ Phone _____

Job Description _____

Dates: From (mm/yy) ____ / ____ To (mm/yy) ____ / ____ Reason for leaving _____

WORK EXPERIENCE

Employer Name _____ Immediate Supervisor _____

Complete Address _____
Street / P.O. Box _____ City _____ State _____ Zip Code _____

Job Title _____ Salary _____ Phone _____

Job Description _____

Dates: From (mm/yy) ____ / ____ To (mm/yy) ____ / ____ Reason for leaving _____

ADDITIONAL INFORMATION

Membership in professional organizations: _____

Licenses, Certificates, special skills, etc. _____

PROFESSIONAL REFERENCES

Name	Address	Phone Number
_____	_____	_____
_____	_____	_____

Signature: _____ Date: _____

By my signature, I affirm, agree, and understand that all statements on this form are true and accurate. Any misrepresentation, falsification, or material omission of information or data on this application may result in exclusion from further consideration or, if hired, termination of employment.

By my signature, I consent to the release of information to authorized officers and agents of Alien University which may include but not limited to information concerning my past and present work, law enforcement records and credit bureaus. I further release Alien University from all claims of whatever nature that I may have as a result of an inquiry or response given to such inquiries made in connection with my application for employment.